

## Instructor Lesson Plan

**Date(s) of class:**

<b>Topic: Pain Management - EBG</b>	<b>Intended learners: EMS MDs, EMSCs, ALS providers</b>
<b>Class facilitator(s):</b> EMS educators	<b>Time allotment:</b> 1 hour
<p><b>Analysis</b> (Needs assessment)</p> <p>Pain management has long been an area of challenge for EMS personnel. There has been inconsistent adoption of definitions, standards, and approaches including medications, doses and routes, often compounded by insufficient monitoring of patients after sedating medications were administered.</p> <p>Alignment to EBG would benefit all stakeholders, especially the patients.</p> <p>The National EMS Scope of Practice Model (2019) states the following: EMS personnel may only perform a skill or role for which that person is:</p> <ul style="list-style-type: none"> <li>▪ EDUCATED (has been trained to perform the skill or role) AND</li> <li>▪ CERTIFIED (has demonstrated competence in the skill or role), AND</li> <li>▪ LICENSED (has legal authority issued by the State to perform the skill or role), AND</li> <li>▪ CREDENTIALLED (has been authorized by medical director to perform the skill or role).</li> </ul>	
<p><b>Prerequisites:</b> General knowledge regarding the etiology and various presentations of pain, patient comorbidities, the pharmacokinetics and drug profiles of common EMS pain medications, and medication administration skills within the scope of practice of each practitioner.</p>	
<p><b>Education Standards being addressed:</b></p>	
<p>QUOTE</p>	
<p><b>Essential Questions and Enduring Understandings</b></p>	
<p><b>Essential question:</b> What changes in EMS pain management guidelines are required to optimize person-centered care and mitigate risk to patient, providers, and EMS leaders?</p> <p><b>Enduring understandings:</b></p> <ul style="list-style-type: none"> <li>▪ Expert EMS knowledge and skill based on continuously evolving contemporary standards and guidelines are required to rapidly and optimally manage all persons seeking EMS services and care. Adaptability, flexibility, higher order thinking, and effective problem-solving are keys to successful practice.</li> <li>▪ Effective communication is required with patients, significant others, bystanders and other healthcare practitioners for multidisciplinary integration, pain care coordination, and optimal outcomes.</li> </ul>	
<p><b>Goal</b></p>	
<p>All EMS practitioners are well-informed about updates to pain management guidelines and translate this knowledge into clinical practice.</p>	
<p><b>Objectives:</b></p>	
<p><b>Upon completion of the assigned readings, class, and/or credit questions, each participant will independently do the following with at least an 80% degree of accuracy and no critical errors for their scope of practice:</b></p> <p><b>Cognitive:</b> Identify the major changes in each section of the new guidelines and explain their rationales.</p> <p><b>Psychomotor:</b> Safely and competently adapt EMS practice to implement the EBG for pain management when caring for patients</p> <p><b>Affective:</b> Accept and defend the need to modify pain management approaches and/or protocols and practice based on high quality research, literature, EMS practice standards and guidelines, or legislative and/or regulatory changes.</p>	
<p><b>Resource materials/handouts/classroom environment</b></p>	
<p><b>AV equipment needs:</b> PowerPoint presentation (ensure internet connectivity for Zoom meeting and sound).</p>	<p><b>Room set up:</b> Optimize clear view of slides and group interaction</p>
<p><b>Teaching resources/supplies/equipment:</b></p> <ul style="list-style-type: none"> <li>▪ Evaluation form for participants to complete</li> <li>▪ CEU certificate to distribute</li> </ul>	<p><b>References for educators:</b></p> <ul style="list-style-type: none"> <li>▪ EBG and rationales</li> <li>▪ Instructor story board/script</li> <li>▪ Lesson plan</li> <li>▪ Recommend that educators read important articles cited in the guidelines prior to teaching class.</li> </ul>
<p><b>Handouts: Participant handout</b></p>	

General class content/activities	Instructional methods	Time
<p>General comments: This slide deck is condensed to only cover the major recommendations and the content is chunked based on the guidelines. Ask participants to hold their questions until natural pauses in the presentation, or entered them into the Q&amp;F features. Otherwise, they may ask questions on content you are just about to cover and the frequent interruptions will slow you to a snail pace that will not allow completion of the class on time.</p>		
<p><b>Declarative content:</b> Points of emphasis are embedded within the slides and slide notes included in the educator script as well as the Changes and Rationales Document that serves as the class handout and this lesson plan. .</p>		
<p>Instructional set: Polling questions – needs assessment Video on the various etiologies and presentation of pain in EMS patients. Discuss the importance of learning and adapting to change. If they have questions about any of these protocols that cannot be answered in class, entered them into the Q&amp;A field and answers will be provided after the presentation.response.</p>	<p>Slides 1-2</p>	<p>5-10 min</p>
<p>Direct instruction/declarative content thoughts</p> <p><b>PAIN</b> Management principles</p> <ul style="list-style-type: none"> <li>▪ Ask participants to identify points of patient history, co-morbidities, and clinical presentation that are needed to determine the type and nature of EMS pain interventions) that may be needed</li> <li>▪ Discuss morphine, fentanyl and ketamine drug profiles in the handout; look particularly at indications and contraindications for each.</li> <li>▪ Play short videos presenting major areas of study and recommendations by SME from committee</li> <li>▪ Discussion to clarify situations where one drug may be preferred over the other.</li> <li>▪ Pose questions: If patient requires pain mgt + sedation which drug may be preferred? If patient would benefit from bronchodilation plus pain mgt, which drug may be preferred? If patient is opiate naïve and IV is started, what drug may be preferred etc....</li> <li>▪ <b>Target outcomes for all pain interventions:</b> Pain drops by at least 2 points - or to &lt;7 so they are no longer in severe pain.</li> <li>▪ <b>Student exercises on calculating doses based on route</b></li> </ul>	<p>Slides Microlearning videos by SMEs +1 Discussion, independent inquiry, , application of facts</p>	<p>35-40min</p>
<p><b>Application:</b> Bridge the learning –Ask questions that will foster understanding, inquiry and transfer of learning for each major point. Go around the group asking what new changes in practice they commit to implementing immediately?</p>		
<p><b>Evaluation:</b> (How will achievement of objectives be measured?)</p>		
<ul style="list-style-type: none"> <li>• Students to fill out and submit class evaluations</li> <li>• CEU certificates awarded – how?.</li> </ul>		
<p><b>Reflection:</b></p>		