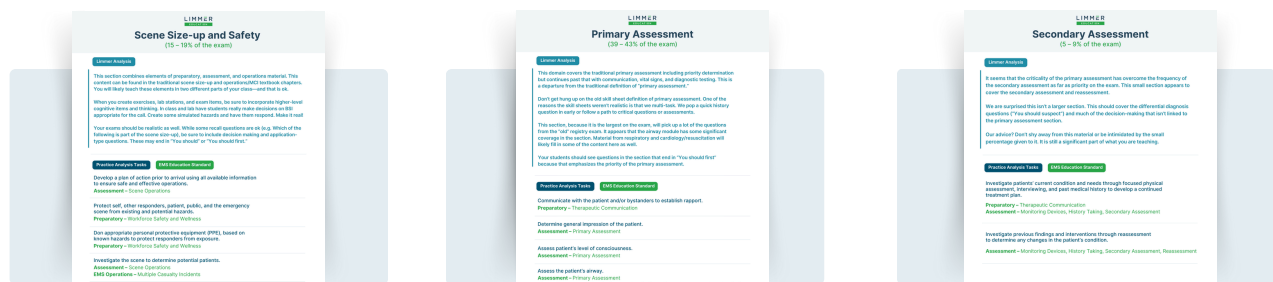


# NREMT BLS Exam Quick Reference

Limmer Education has combined the new NREMT BLS exam blueprint with the practice analysis tasks and education standard sections—and added insights in this quick reference to help you get up to speed with the new exam **ASAP!**



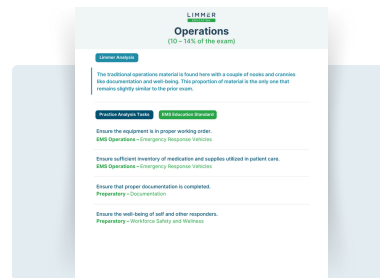
**Scene Size-up  
and Safety**  
(15 - 19%)

**Primary  
Assessment**  
(39 - 43%)

**Secondary  
Assessment**  
(5 - 9%)



**Patient Treatment  
and Transport**  
(20 - 24%)



**Operations**  
(10 - 14%)

Limmer Education was a leader in implementing the new ALS exams and question types and we are already updating our content, exams, and diagnostic score reporting to match the new BLS exam.

Reach out to us for additional resources on implementing the exam and to get on our mailing list.

Call us 207.482.0622. | Email us support@limmereducation.com

# Scene Size-up and Safety

(15 – 19% of the exam)

## Limmer Analysis

This section combines elements of preparatory, assessment, and operations material. This content can be found in the traditional scene size-up and operations/MCI textbook chapters. You will likely teach these elements in two different parts of your class—and that is ok.

When you create exercises, lab stations, and exam items, be sure to incorporate higher-level cognitive items and thinking. In class and lab have students really make decisions on BSI appropriate for the call. Create some simulated hazards and have them respond. Make it real!

Your exams should be realistic as well. While some recall questions are ok (e.g. Which of the following is part of the scene size-up), be sure to include decision making and application-type questions. These may end in “You should” or “You should first.”

## Practice Analysis Tasks

## EMS Education Standard

Develop a plan of action prior to arrival using all available information to ensure safe and effective operations.

**Assessment** – Scene Operations

Protect self, other responders, patient, public, and the emergency scene from existing and potential hazards.

**Preparatory** – Workforce Safety and Wellness

Don appropriate personal protective equipment (PPE), based on known hazards to protect responders from exposure.

**Preparatory** – Workforce Safety and Wellness

Investigate the scene to determine potential patients.

**Assessment** – Scene Operations

**EMS Operations** – Multiple Casualty Incidents

Triage patients to ensure optimal care.

**EMS Operations** – Multiple Casualty Incidents

Request appropriate resources based on known hazards and patient conditions to mitigate all facets of the emergency scene.

**Assessment** – Scene Operations

# Primary Assessment

(39 – 43% of the exam)

## Limmer Analysis

This domain covers the traditional primary assessment including priority determination but continues past that with communication, vital signs, and diagnostic testing. This is a departure from the traditional definition of “primary assessment.”

Don’t get hung up on the old skill sheet definition of primary assessment. One of the reasons the skill sheets weren’t realistic is that we multi-task. We pop a quick history question in early or follow a path to critical questions or assessments.

This section, because it is the largest on the exam, will pick up a lot of the questions from the “old” registry exam. It appears that the airway module has some significant coverage in the section. Material from respiratory and cardiology/resuscitation will likely fill in some of the content here as well.

Your students should see questions in the section that end in “You should first” because that emphasizes the priority of the primary assessment.

## Practice Analysis Tasks

## EMS Education Standard

Communicate with the patient and/or bystanders to establish rapport.

**Preparatory** – Therapeutic Communication

Determine general impression of the patient.

**Assessment** – Primary Assessment

Assess patient’s level of consciousness.

**Assessment** – Primary Assessment

Assess the patient’s airway.

**Assessment** – Primary Assessment

**Airway Management, Respiration, and Ventilation** – Airway Management and Ventilation

Assess patient’s breathing status.

**Assessment** – Primary Assessment

**Airway Management, Respiration, and Ventilation** – Airway Management and Ventilation

# Primary Assessment

(39 – 43% of the exam)

Practice Analysis Tasks

EMS Education Standard

Assess patient's circulation.

**Assessment** – Primary Assessment

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Determine chief complaint and life threats.

**Assessment** – Primary Assessment

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Obtain results of patient's baseline vital signs and diagnostic testing.

**Assessment** – Monitoring Devices, History Taking, Secondary Assessment

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Identify the need for rapid treatment, rapid transport, or additional resources.

**Assessment** – Scene Operations, Primary Assessment

# Secondary Assessment

(5 – 9% of the exam)

## Limmer Analysis

It seems that the criticality of the primary assessment has overcome the frequency of the secondary assessment as far as priority on the exam. This small section appears to cover the secondary assessment and reassessment.

We are surprised this isn't a larger section. This should cover the differential diagnosis questions ("You should suspect") and much of the decision-making that isn't linked to the primary assessment section.

Our advice? Don't shy away from this material or be intimidated by the small percentage given to it. It is still a significant part of what you are teaching.

## Practice Analysis Tasks

## EMS Education Standard

Investigate patients' current condition and needs through focused physical assessment, interviewing, and past medical history to develop a continued treatment plan.

**Preparatory** – Therapeutic Communication

**Assessment** – Monitoring Devices, History Taking, Secondary Assessment

Investigate previous findings and interventions through reassessment to determine any changes in the patient's condition.

**Assessment** – Monitoring Devices, History Taking, Secondary Assessment, Reassessment

# Patient Treatment and Transport

(20 – 24% of the exam)

## Limmer Analysis

While the specific tasks below are limited to airway, cardiovascular, and musculoskeletal emergencies, the treatment and transport of all conditions will be covered here. Pharmacology is covered in this section. This will be part of the treatment of conditions not specifically mentioned here (opioid overdose, diabetic conditions, etc.). The patient handoff and special populations are also in this section.

We believe the exam will drop to about 10% of pediatric questions from the prior 15%.

## Practice Analysis Tasks

## EMS Education Standard

Manage the patient airway, ventilation, and oxygenation.

**Airway Management, Respiration, and Ventilation** – Airway Management, Respiration, and Ventilation

Manage the patient cardiovascular and circulatory system.

**Medicine** - Cardiovascular

Manage motion restriction of the patient musculoskeletal system.

**Trauma** – Orthopedic Trauma

Administer medication.

**Pharmacology** – Principles of Pharmacology, Medication Safety

Manage interventions specific to special populations.

**Special Populations** – All sections

Manage patient transport.

**Preparatory** – Workforce Safety and Wellness

Communicate pertinent patient information.

**Preparatory** – EMS System Communication

# Operations

(10 – 14% of the exam)

## Limmer Analysis

The traditional operations material is found here with a couple of nooks and crannies like documentation and well-being. This proportion of material is the only one that remains slightly similar to the prior exam.

## Practice Analysis Tasks

## EMS Education Standard

Ensure the equipment is in proper working order.

**EMS Operations** – Emergency Response Vehicles

Ensure sufficient inventory of medication and supplies utilized in patient care.

**EMS Operations** – Emergency Response Vehicles

Ensure that proper documentation is completed.

**Preparatory** – Documentation

Ensure the well-being of self and other responders.

**Preparatory** – Workforce Safety and Wellness