

**AMERICAN OSTEOPATHIC BOARD OF EMERGENCY MEDICINE  
TABLE OF SPECIFICITY FOR CERTIFICATION/RECERTIFICATION  
WRITTEN EXAMINATION FOR THE SUBSPECIALTY IN EMERGENCY MEDICAL  
SERVICES**

Ranking refers to representation of content among the 150 items on the examination.

**Table of Contents**

<u>CORE CONTENT CATEGORIES</u>	<u>RANKING</u>
<b>1.0 EMS Systems</b>	M
1.1 History	L
1.1.1 Military Field Care	L
1.1.2 Early Emergency Care	L
1.1.3 National Academy of Sciences – National Research	L
1.1.4 White House Demonstration Projects	L
1.1.5 EMS Act	M
1.1.6 Resuscitation Development	L
1.1.7 Development EMS Standards	M
1.1.8 EMS Agenda for the Future	H
1.2 Legislation	M
1.2.1 EMS Act	M
1.2.2 Preventative “Block Grants”	L
1.2.3 Federal/State/Local EMS Regulations	M
1.2.4 Development Federal/State/Local Legislation	M
1.3 Models	L
1.3.1 Urban	L
1.3.2 Rural	L
1.3.3 Fire	L
1.3.4 Public Utility/Third Service	L
1.3.5 Private	L
1.3.6 Volunteer	L
1.3.7 Military	L
1.4 International	L
1.4.1 European Models	L
1.4.2 Asian Models	L
<b>2.0 EMS Elements</b>	M
2.1 Communications/Dispatch Systems	M
2.1.1 EMS Access Processes	M
2.1.2 Communication Capabilities	M
2.1.2.a 9-1-1/Enhanced 9-1-1	H
2.1.2.b UHF/VHF/Truncated Capabilities	M
2.1.2.c Cellular Technology	M
2.1.2.d Satellite Technology	L
2.1.2.e Data Transmission/Web Technologies/Telemedicine	M
2.1.3 Communication Strategies	M
2.1.3.a EMS System	M
2.1.3.b Medical Community	M
2.2 EMS Practice Scope	H
2.2.1 EMD	H

2.2.2	EMR	H
2.2.3	Advanced EMT	H
2.2.4	EMT-Paramedic	H
2.2.5	Alternative EMS Practice	M
2.2.6	Nurses/Allied Health Professionals	M
2.2.7	Physicians	H
2.3	System Design	H
2.3.1	Resource Composition	M
2.3.2	Resource Staffing	M
2.3.3	Scope EMS Medical Care	H
2.3.4	Community/Patient Population Assessment	M
2.4	System Configuration/Response Plans	M
2.4.1	Response Recruitment/Configuration Triggers	M
2.4.2	Response Determinates	M
2.5	EMS Receiving Facilities/Destination Options	M
2.5.1	Facility Designations	M
2.E.1.a	Hospital/Acute Care Facilities	M
2.E.1.b	Alternative Facilities	M
2.5.2	Inter-facility Transfers	H
2.5.3	Specialized Care Facilities	M
2.5.4	Destination Decisions	H
2.6	Resources	M
2.6.1	Funding/Financing Sources	M
2.6.2	Budget Processes	M
2.6.3	Proposal Development	M
2.6.4	Request for Proposal Development/Defense	M
2.6.5	Reimbursement/Billing	M
2.6.6	Federal/State Regulations	H
2.7	Mutual Aid Plans	M
2.7.1	Regional Resources	M
2.7.2	Interagency Intra-operability	M
2.7.3	Interagency Agreements	M
2.7.4	Resource Allocation Planning/Strategies	M
2.8	Public Health	M
2.8.1	Prevention	M
2.8.2	Wellness/Health Promotion	M
2.8.3	Incorporation EMS in Public Health Strategies	M
2.8.4	EMS Involvement in the Community	M
2.8.5	Public Education/Interactions	M
<b>3.0</b>	<b>Medical Oversight</b>	H
3.1	Federal/State/Local Regulatory Structure	H
3.2	Scope of Authority EMS Medical Director	H
3.3	Qualifications/Requirements EMS Medical Director	H
3.4	Medical Credentialing	H
3.4.1	Qualifications/Approval EMS personnel	H
3.4.2	Qualifications/Approval Other Medical Oversight Personnel	H
3.5	Education	H
3.5.1	Core Content Primary Education	H
3.5.2	Continuing Education Content	H
3.5.3	Educator/Instructor Competency	H
3.5.4	Implementation New Interventions	H
3.6	Direct	H

3.6.1 On-line/Base-station	H
3.6.2 Verbal/Immediate	H
3.6.3 Activation Triggers	H
3.7 Indirect	H
3.7.1 Off-line/Medical Director	H
3.7.2 Activation Triggers	H
3.8 Transition of Care Processes	H
3.8.1 Transfer of Care Processes	H
3.8.2 Out of Hospital Evaluation//Treat and Release Processes	H
3.9 Quality Performance	H
3.9.1 Standards development	H
3.9.2 Development of Quality Performance Plans	H
3.9.3 Analysis Quality Initiative Objectives and Data	H
3.9.4 Performance Evaluation Processes	H
3.9.5 Development Plans of Correction and Re-evaluation	H
3.9.6 Evaluation Processes New Medical Innovations	H
3.10 Risk Management	H
3.10.1 Documentation Standards	H
3.10.2 High Risk Situation Policies	H
3.10.2.a Patient Belief/Faith Considerations	H
3.10.2.b Patient Restraints Physical/Chemical	H
3.10.3 Risk Stratification	H
3.10.4 Patient Care Incident Management	H
3.10.5 Impaired Provider Processes	H
3.11 Legal Issues	H
3.11.1 Federal/State/Local Regulations	H
3.11.2 Privacy Standards	H
3.11.3 Responsibilities	H
3.11.4 Medical Legal Policies	H
3.11.4.a Consent	H
3.11.4.b Refusal/Multiple Victim Refusal	H
3.11.4.c Advance Directives	H
3.11.4.d DNR	H
3.11.5 Immunity	H
3.11.6 Liability/Litigation	H
3.11.7 Professional Expert	H
3.12 Ethical Issues	H
3.12.1 Triage/MCI Issues	M
3.12.2 Resuscitation Issues	H
3.12.3 Information Disclosure in Complex Cases	M
3.12.4 Influencing Patient Decisions	M
3.12.5 Physical Harm Risk Decisions	M
<b>4.0 Medical Operations</b>	H
4.1 Routine Ground Operations	H
4.1.1 Federal/State/Local Regulations	H
4.1.2 Policy/Protocol Development	H
4.1.3 Utilization Decisions	M
4.1.4 Patient Considerations	H
4.2 Critical Care Operations	M
4.2.1 Federal/State/Local Regulations	M
4.2.2 Policy/Protocol Development	M
4.2.3 Utilization Decisions	M

4.2.4 Patient Considerations	M
4.2.5 Integration into the EMS System	M
4.3 Air-Medical Operations	M
4.3.1 Federal/State/Local Regulations	M
4.3.2 Air Transportation Options	M
4.C.2.a Rotorcraft	M
4.C.2.b Fixed-wing Craft	M
4.3.3 Policy/Protocol Development	M
4.3.4 Utilization Decisions/Contraindications	H
4.3.5 Patient Considerations	H
4.3.6 Integration into the EMS System	M
4.4 EMS Physician Clinical Practice	H
4.4.1 Policy Development	H
4.4.2 Utilization/Activation Triggers	H
4.4.3 In-field Clinical Scope	H
4.4.3.a Patient Assessment/Care Various Clinical Conditions	H
4.4.3.b Organization Scene Care/Resources	H
4.4.3.c Preparation/Plan Definitive Care Transition	H
<b>5.0 Medical Protocols</b>	H
5.1 Protocol Design	H
5.1.1 Medical Protocols	H
5.1.2 Trauma Protocols	H
5.1.3 Pediatric Protocols	H
5.1.4 Special Needs Patient Populations	H
5.2 EMS Interventions	H
5.3 EMS Pharmacotherapy	H
<b>6.0 Administrative Operations</b>	H
6.1 Federal/State/Local Governing Agencies/Regulations	H
6.2 Regulatory Interfaces	H
6.3 Agency/Hospital Interfaces	M
6.4 Agency Accreditation	M
6.5 Strategic Planning	M
6.6 Human Relations	L
6.7 Labor Relations	L
6.8 Due Process	H
6.9 Negotiations	L
6.10 Occupation Health/Safety	M
6.10.1 Federal/State Regulations	M
6.10.2 Scene Rehabilitation	M
6.10.3 Exposure/Transmission of Infectious Diseases	M
6.10.4 Personnel Wellnes	M
6.10.4.a Stress Prevention	M
6.10.4.b Stress Management	M
6.10.4.c Physical Fitness	M
6.10.4.d Peer Support/Pastoral Care	M
6.10.5 Impaired Personnel	H
6.10.5.a Psychiatric Diseases	M
6.10.5.b Substance Abuse	H
6.11 Information Systems	M
6.12 Resource Management	M
6.13 Media Relations/Interactions	M
<b>7.0 Special Operations</b>	M

7.1 Wilderness	L
7.1.1 Definitions	L
7.1.2 Planning	L
7.1.3 Interventions/Protocols	L
7.2 High Angle Rescue	M
7.2.1 Definitions	L
7.2.2 Planning	L
7.2.3 Interventions/Protocols	L
7.3 Confined Space Rescue	L
7.3.1 Definitions	L
7.3.2 Planning	L
7.3.3 Interventions/Protocols	L
7.4 HAZMAT/WMD	M
7.4.1 Incident Identification/Classification	M
7.4.2 Incident Response	M
7.4.3 Incident/Victim Management	M
7.4.4 Interventions/Protocols	M
7.4.5 Planning	M
7.5 Tactical EMS	M
7.5.1 Definitions	M
7.5.2 Roles	M
7.5.3 Event Types	M
7.5.4 Planning	M
7.5.5 Integration into the EMS System	M
7.6 Airline/Cruise Ship Medicine	L
7.6.1 Definitions	L
7.6.2 Planning	L
7.6.3 Interventions/Protocols	L
7.7 Mass Gathering Incidents	H
7.7.1 Event Types	H
7.7.2 Planning	M
7.8 Mass Casualty Incidents	H
7.8.1 Definitions	H
7.8.2 Incident Command System	H
7.8.3 National Disaster Management System	H
7.8.4 Phases	H
7.8.5 Planning	H
7.8.6 Evaluation/Drills	H
<b>8.0 EMS Research</b>	M
8.1 Grant Development	M
8.2 Research Methodology & Design	L
8.3 Statistics	L
8.4 Institutional Review Board	M
8.5 Consent	M
8.6 Ethical Considerations	H
8.7 Literature Review	M
8.8 Resources/Funding	M
8.9 Evidence Based Practice	M
8.10 Limitations/Barriers EMS Research	M