

Designation: F1705 - 96 (Reapproved 2012)

Standard Guide for Training Emergency Medical Services Ambulance Operations¹

This standard is issued under the fixed designation F1705; the number immediately following the designation indicates the year of original adoption or, in the case of revision, the year of last revision. A number in parentheses indicates the year of last reapproval. A superscript epsilon (ε) indicates an editorial change since the last revision or reapproval.

1. Scope

- 1.1 This guide provides minimum training standards for Emergency Medical Services (EMS) Ambulance Operators including legal aspects, operator qualifications and testing, history of EMS vehicle operations, vehicle types/equipment, safety, physical forces, mechanics, pre-run, operations, post-run, and special circumstances.
- 1.2 This guide promotes the safe and efficient delivery of the ambulance, equipment, crew, passengers and patients, during all phases of the delivery of EMS involving the ambulance; at all times exercising the highest degree of care for the safety of the public. This guide may be applied to the driving of other EMS vehicles that do not necessarily provide patient transportation.
- 1.3 This guide shall be used as the basis for all programs relevant to the training of the emergency medical services operators.
- 1.4 This standard does not purport to address all of the safety concerns, if any, associated with its use. It is the responsibility of the user of this standard to establish appropriate safety and health practices and determine the applicability of regulatory limitations prior to use.

2. Referenced Documents

2.1 ASTM Standards:²

F1177 Terminology Relating to Emergency Medical Services

F1230 Specification for Minimum Performance Requirements for Emergency Medical Service (Ems) Ground Vehicles (Withdrawn 1997)³

 $^{\rm I}$ This guide is under the jurisdiction of ASTM Committee F30 on Emergency Medical Services and is the direct responsibility of Subcommittee F30.02 on Personnel, Training and Education.

Current edition approved July 1, 2012. Published August 2012. Originally approved in 1996. Last previous edition approved in 2007 as F1705 - 96 (2007). DOI: 10.1520/F1705-96R12.

² For referenced ASTM standards, visit the ASTM website, www.astm.org, or contact ASTM Customer Service at service@astm.org. For *Annual Book of ASTM Standards* volume information, refer to the standard's Document Summary page on the ASTM website

³ The last approved version of this historical standard is referenced on www.astm.org.

F1258 Practice for Emergency Medical Dispatch

F1517 Guide for Scope of Performance of Emergency Medical Services Ambulance Operations

2.2 Federal Specification:⁴

KKK 1822C Federal Specification for the Star-of-Life Ambulance

3. Terminology

- 3.1 For definitions of other emergency medical terms, see Terminology F1177:
 - 3.2 Definitions of Terms Specific to This Standard:
- 3.2.1 ambulance operations—the efficient delivery of the ambulance, equipment, crew, passengers, and patients during all phases of the delivery of EMS involving the ambulance, at all times exercising the highest degree of care for the safety of the public.
- 3.2.2 ambulance service provider—as outlined in this guide, a person, company, corporation, or political entity responsible for operation, maintenance, or policy-making, or all three, regarding emergency medical vehicle operations.
- 3.2.3 bona fide occupational qualification (BFOQ)—the skills and knowledge relevant to the performance of a specific task
- 3.2.4 *departure check*—the visual check of the vehicle and surrounding area, ensuring that equipment and supplies have been retrieved and properly stored and that all compartment doors are secured.
- 3.2.5 *egress check*—the visual check of the vehicle and surrounding area prior to operating the ambulance.
- 3.2.6 *emergency mode*—as defined by individual state statutes that refer to emergency vehicles, equipment, and operations.
- 3.2.7 *full check*—a comprehensive and systematic evaluation of the ambulance at specified intervals, including documentation of the inspection, deficiencies, and their corrective actions.
- 3.2.8 *operator*—a person who operates or assists with the operation of an ambulance.

⁴ Available from U.S. Government Printing Office Superintendent of Documents, 732 N. Capitol St., NW, Mail Stop: SDE, Washington, DC 20401.

TABLE 1 Emergency Medical Services Ambulance Maintenance Guidelines for Checklist Completion

Runs per week (per vehicle)	Full check	Quick check
0 to 1	every 96 h	every 24 h
2 to 3	every 72 h	every 24 h
4 to 7	every 48 h	every 24 h
8 to 50	every 24 h	every 12 h
50+	every 24 h	every 8 h

- 3.2.9 *driver*—the individual responsible for operating the ambulance in a safe and efficient manner, exercising the highest degree of care.
- 3.2.10 *technician*—the individual responsible for patient care.
- 3.2.11 *post-run*—the managed return of the ambulance and operators to optimal pre-run readiness.
 - 3.2.12 *pre-run*—all aspects of assuring response readiness.
- 3.2.13 *quick check*—an abbreviated version of the full check, focusing on the major operational functions of the vehicle.
- 3.2.14 *reaction time*—from the time the operator identifies the hazard until the appropriate action is taken.
- 3.2.15 *response mode management*—the response mode of the ambulance shall be determined by dispatch protocols based on (dispatch) determinants as approved by the medical director. The determinants shall be consistent with Practice F1258.
- 3.2.16 *stopping distance*—the distance the vehicle travels until it comes to a stop after the brakes are applied.

4. Significance and Use

- 4.1 This guide provides minimum training guidelines for safe and efficient ambulance operations.

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- 4.2 Ambulance providers and educators should follow this guide for the development of educational and training programs.
- 4.3 This guide is intended to promote safe and efficient ambulance operations and to reduce morbidity, mortality, and property loss associated with ambulance operations.
- 4.4 This guide is intended to assist those who are responsible for the development and implementation of policies and procedures for ambulance operations.
- 4.5 Topics or concepts listed in this guide are intended to serve as an outline of materials to be covered in the training of ambulance operators.

5. Legal Aspects

- 5.1 The training of the ambulance operator shall include all federal and state laws and local ordinances including the provider's policies governing emergency medical vehicle operations. The operator/driver shall have a clear understanding of the impact of those laws on the operation of the vehicle.
- 5.1.1 Constitutional Law—Laws derived from the U.S. Constitution governing the patient's right before, during, and after transport.
 - 5.1.2 Statutory Law—Laws derived from legislative acts.

- 5.1.3 *Ordinances*—Laws or guidelines enacted by a governing municipal body or its agent.
- 5.1.4 *Rules and Regulations*—Guidelines enacted by an agency that have the force of law that are intended to provide greater specificity about statutory laws.
- 5.1.5 Case Law—Judicial interpretation of statutory law, rules, or regulations that have been decided in a court of law.
- 5.1.6 Consolidated Omnibus Reconciliation Act (COBRA)/ Omnibus Reconciliation Act (OBRA) Laws.
- 5.2 Integration of state laws and local ordinances with company policies/procedures. Company policy should incorporate into guidelines the principles of applicable state laws, local ordinances, rules, and regulations.
- 5.3 Highest Degree of Care (Law of Due Regard)—A general principle, frequented in case law, that holds the ambulance operator responsible for his actions regardless of perceived exemptions from traffic laws governing the emergency vehicle operator.

5.4 Legal Issues:

- 5.4.1 *Negligence*—Any action that violates a standard of practice or care related to ambulance operation.
- 5.4.2 Abandonment—Terminating care or transportation prior to being relieved by other qualified health care providers. Once a patient provider relationship is established, it must continue until responsibility for the patient is assumed by a provider of equal or higher qualifications.
- 5.4.3 Emergency Medical Dispatch—An organized system of emergency medical dispatching principles intended to provide guidelines for ambulance operations as delineated in Practice F1258.
 - 5.4.4 Multiple Responding Units:
- 5.4.4.1 *Vehicle Separation*—The operator shall be trained to maintain a minimum 300-ft buffer zone between the ambulance and other emergency vehicles on the same route of travel.
- (1) Weather, traffic conditions, or other factors may cause the operator to increase the length of the buffer zone for the safe operation of the ambulance.
- 5.4.4.2 *Escorts*—The operator shall be informed of the hazards involved in the use of emergency vehicle escorts and be trained to avoid such practices.
- (1) The operator shall be trained to discourage private, non-emergency vehicles from following the ambulance during transport.
 - 5.4.5 Interacting with Public Safety Agencies:
- 5.4.5.1 *Command*—Ambulance operations shall be consistent with operational guides delineated in Incident Command System (ICS).
- 5.4.5.2 *Communication*—Ambulance communication systems should allow the ambulance operator to communicate with other public safety agencies.
- 5.4.5.3 *Coordination*—Cooperative guidelines shall be established with other public safety agencies in order to provide a safe and adequate response.
 - 5.4.6 Motor Vehicle Accidents Involving the Ambulance:

- 5.4.6.1 *Reporting*—The ambulance operator shall receive instructions regarding reporting guidelines for ambulance related accidents/incidents in accordance with state laws, local ordinances, rules or regulations, and organizational policies and procedures.
 - 5.4.7 Mitigation/Documentation Mechanical Failures:
- 5.4.7.1 *Scheduled Maintenance*—The ambulance operator shall be trained in the importance of a scheduled maintenance program.
- 5.4.7.2 *Vehicle and Equipment Inspections*—The ambulance operator shall be trained in the fundamentals and application of vehicle and equipment inspections.
- 5.4.7.3 Reporting of Deficiencies—The ambulance operator shall understand the importance of inspecting the ambulance and equipment, and shall be familiar with the reporting procedures utilized by the provider. The ambulance operator shall be familiar with provider policies in regard to major deficiencies which have an affect on the serviceability of the vehicle.

6. Operator Qualifications to Drive

- 6.1 The training of the ambulance operator shall include the components of evaluation techniques which may be utilized in screening the operator candidate:
- 6.1.1 *Medical Fitness to Drive*—Operators shall be subject to periodic medical evaluations as determined by the ambulance service provider. The purpose of the physical examination is to determine whether the operator has the physical ability to adequately perform his or her duty as an operator of emergency vehicles. (See Guide F1517.)
 - 6.2 Authorization:
- 6.2.1 The authorization of ambulance operators must be based on Bona Fide Occupational Qualification (BFOQ) pursuant to the task of ambulance operations.
- 6.2.2 Authorization shall be based upon cognitive evaluation of the operator regarding laws, guidelines, and policies relating to ambulance operation during emergency and non-emergency modes.
- 6.3 A periodic review of the operator's state motor vehicle record for the previous three years with specific attention to traffic convictions concerning:
 - 6.3.1 Speed.
 - 6.3.2 Careless and imprudent driving.
- 6.3.3 Driving under the influence of alcohol or other mindaltering substances.
 - 6.3.4 Moving violations/other violations.
 - 6.3.5 Suspension of driver's license.
- 6.4 A review of the operator's motor vehicle accidents for the previous three years.
- 6.5 The operator shall possess a valid motor vehicle license, and any other certification required by state or local laws or regulations.
- 6.6 The operator's qualifications and continuing education shall be reviewed annually.

7. Operator Testing

- 7.1 The training of the ambulance operator shall include the components of evaluation techniques which may be utilized in screening the operator candidate:
 - 7.1.1 Psychological testing.
 - 7.1.2 Physical agility.
 - 7.1.3 Driving evaluation.
 - 7.1.4 Cognitive evaluation.

8. History of EMS Vehicle Operation

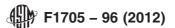
- 8.1 The training of the emergency vehicle operator shall include the history of EMS vehicle operation:
- 8.1.1 Evolution of ambulance driving from high-force pursuit driving to low G-force driving techniques.
 - 8.1.2 Changes in vehicle design and dynamics.
 - 8.1.3 Evolution of governmental regulation.
- 8.1.3.1 Specification F1230, Minimum Performance Requirements for Emergency Medical Service Ground Vehicles.
- 8.1.3.2 Federal standards KKK 1822C: "A" through current specifications.

9. Vehicular Types and Equipment

9.1 The training of the ambulance operator shall include the different ambulance classifications (Type I, II, III, and specialty response vehicles) including maneuverability, handling, weight distribution, payload allowance, and GVWR.

10. Loss Control and Safety Issues in the Operations of Ambulances

- 10.1 *Preventive Maintenance*—The ambulance operator shall be trained in basic techniques, documentation, and rationale for preventive maintenance.
- 10.1.1 The operator should follow provider policies or manufacturer's suggested maintenance schedule, or both, for the ambulance.
- 10.2 Operator Fatigue—The ambulance operator shall be trained in the recognition of the adverse affects of excessive fatigue. The provider/operator shall be familiar with methods and policies used to prevent fatigue-related operator dysfunction.
- 10.3 Interactive Crew Roles—Operators shall receive instruction on the importance of interactive roles utilized to lessen risk exposure, such as the ground guide/driver relationship in backing the ambulance or the driver/technician relationship in approaching controlled intersections.
- 10.4 *Unsafe Thought Patterns*—The operator shall be made aware of the importance of concentration on the driving task at hand and should be aware of dangerous practices such as allowing the nature of the emergency to affect driving techniques or other high-risk behavior.
- 10.5 Resolving Conflict—The driver shall be trained to make determinations regarding the safe operation of the ambulance. The operator shall be aware that the senior medical crew member shall make determinations regarding transportation mode and patient destination.



- 10.6 Patient Handling Equipment—The ambulance operator shall be trained in the proper operation, storage, and handling of all equipment used in the treatment and transport of the patient.
- 10.7 OSHA Guidelines—The operator/provider shall be trained in the utilization of OSHA guidelines pertaining to factors affecting the operation of the emergency vehicle.
- 10.8 *Hazmat Guidelines*—The operator shall be trained to adhere to the regulations and guidelines regarding ambulance operations near a hazardous material environment.

11. Vehicular Dynamics

- 11.1 Low Force Driving—The operator shall be trained to utilize low-force driving techniques in order to minimize fatigue, stress, mechanical degradation, and other risks associated with operation of the ambulance.
- 11.2 *Physical Forces*—The operator shall be trained regarding the impact of physical forces on the ambulance during various operational maneuvers.
- 11.3 Weight Transfer—The operator shall be trained regarding effects that weight transfer may have on the operation of the ambulance.
- 11.4 Gross Vehicle Weight Rating (GVWR)—The operator shall be trained regarding the payload capacity of the emergency vehicle, including the adverse effects of overloading.
- 11.5 Adverse Driving Conditions—The operator shall be trained to modify driving techniques to compensate for adverse driving conditions.

12. Major Mechanical Systems

- 12.1 The operator shall be trained in the basic concepts related to the proper use and function of the following systems:
- http12.1.1 Electrical. h.ai/catalog/standards/sist/d5d6a265-03b9
 - 12.1.2 Cooling.
 - 12.1.3 Braking.
 - 12.1.4 Engine/Drive train.
 - 12.1.5 Fuel.
 - 12.1.6 Chassis.
 - 12.1.7 Environmental control.
 - 12.1.8 Ancillary support equipment.
 - 12.1.9 Auxillary power.

13. Pre-Run

- 13.1 *Geography*—The operator shall be trained regarding the geographical area served by the provider, as well as any locating systems used by the provider.
- 13.2 *Environmental Factors*—The operator shall be trained to be constantly aware of changing environmental factors and how they may affect ambulance operations.
- 13.3 *Traffic Patterns*—The operator shall be trained to be aware of traffic flow patterns and road conditions and how they may affect ambulance operations.
- 13.4 *Quick Check*—The operator shall be trained to perform the quick check as outlined below:
 - 13.4.1 Visually checking for fluid leakage.

- 13.4.2 Conducting vehicle warm-up.
- 13.4.3 Checking fluid levels.
- 13.4.4 Condition of belts.
- 13.4.5 Condition of tires.
- 13.4.6 Proper function of emergency lighting.
- 13.4.7 Proper function of lighting system.
- 13.4.8 Proper function of audible warning devices.
- 13.4.9 Vehicle cleanliness.
- 13.4.10 Proper function of communications equipment.
- 13.4.11 Proper function of warning lights.
- 13.5 *Full Check*—The operator shall be trained to perform the full check as outlined below:
 - 13.5.1 Body or glass damage.
 - 13.5.2 Proper function of emergency lights.
 - 13.5.3 Proper function of operating lights.
 - 13.5.4 Condition of tires.
 - 13.5.5 Loose or missing lugs on wheels.
 - 13.5.6 Proper function and seal of compartment doors.
 - 13.5.7 Fluid levels.
 - 13.5.8 Fluid leakage.
 - 13.5.9 Condition of hoses.
 - 13.5.10 Condition of belts.
 - 13.5.11 Cleanliness of exterior and interior.
 - 13.5.12 Proper function of restraint devices.
 - 13.5.13 Proper function of gages.
 - 13.5.14 Proper function of windshield wipers/washer.
 - 13.5.15 Proper function of communications equipment.
 - 13.5.16 Proper adjustment of mirrors.
 - 13.5.17 Proper function of audible warning devices.
 - 13.5.18 Proper adjustment of seats.
 - 13.5.19 Proper adjustment of steering wheel.
 - 13.5.20 Condition of fire extinguishers.
 - 13.5.21 Proper function of environmental control systems.
 - 13.5.22 Inventory of equipment and supplies.
 - 13.5.23 Level and alignment of chassis.
 - 13.5.24 Proper function of warning indicator lights.
- 13.6 *Documentation of Problems*—The operator shall be trained in techniques of proper documentation and reporting of problems found through the quick or full check.

14. Operations

- 14.1 The operator shall be trained in all aspects of emergency vehicle operations as they pertain to the overall prehospital care within the response area. The following subjects shall be included in the training curriculum:
 - 14.1.1 Response Mode Management:
- 14.1.1.1 The operator shall be informed of studies that indicate that 40 % of all ambulance calls are requested as an emergency and of those 20 % are true medical emergencies with less than 5 % being life-threatening.
 - 14.1.1.2 The two response modes are:
- (1) Emergency—Exercising emergency driving privileges and the utilization of all emergency warning lights and audible warning systems.
- (2) *Non-emergency*—Operating the vehicle under all traffic laws which govern the general operation of motor vehicles.