State of New Jersey Office of Emergency Telecommunications Services EMD Guidecard Tracking Form

Student:				
Guidecard	Call-taker	Caller	Evaluator	
Traumatic Incident Types:				
1) Animal Bites				
2) Assault / Sexual Assault				
3) Bleeding / Laceration				
4) Burns				
5) Eye Problems / Injuries				
6) Fall Victim				
7) Heat / Cold Exposure				
8) Industrial Accident				
9) Stabbing / Gunshot Victim				
10) Traumatic Injury				
11) Vehicular Related Injuries				
Medical Chief Complaint Types				
12) Abdominal Pains				
13) Allergies / Stings				
14) Back Pain				
15) Breathing Problems				
16) Chest Pain / Heart Problems				
17) Diabetic Problems				

18) Headache		
19) OD / Poisonings / Ingestions		
20) Psychiatric / Behavioral Problems		
21) Seizures / Convulsions		
22) Sick Person		
23) Stroke / CVA		
24) Unknown / Man Down		
Time / Life-Critical Events		
25) CO Poisoning / HAZMAT		
26) Cardiac Arrest		
27) Choking		
28) Drowning (Possible)		
29) Electrocution		
30) Pregnancy / Childbirth		
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Instructions:

Each EMD student should be exposed to each of the guidecards in at least one of the three categories listed at some point during the training program. It is the student responsibility to maintain this form and to initial the appropriate blocks when completed. It is the instructor responsibility to review the forms periodically to ensure all students have worked with each of the 31 guidecards prior to testing and completion of the program.