

2026 St. Joseph County Emergency Medical Response Plan (EMRP) Exam

NAME: _____ Date: _____

All levels of practitioner in the county must complete this exam. A score of 80% or higher is required. A score less than 80% will require remediation with the EMS coordinator(s) or medical director(s). This is an open book/open resource exam.

1. Who must follow the EMRP when responding to a mass casualty incident in St. Joseph county?
 - a. All agencies, regardless of affiliation
 - b. Only those aligned with the St. Joseph County EMS Committee/System
 - c. Only transport agencies
 - d. Only non-transport agencies
2. For what type of exposure should a CHEMPACK be requested?
 - a. Cyanide
 - b. Carbon monoxide
 - c. Radiation
 - d. Organophosphate and other nerve agents
3. Which hospitals have EMS and/or hospital CHEMPACKs in the area? (Choose all that apply)
 - a. St. Joseph Mishawaka Medical Center
 - b. Memorial Hospital South Bend
 - c. Beacon Granger Hospital
 - d. Elkhart General Hospital
 - e. St. Joseph Plymouth Medical Center
4. Which of the hospitals listed below are state verified trauma centers? (choose all that apply)
 - a. St. Joseph Mishawaka Medical Center
 - b. Memorial Hospital South Bend
 - c. Beacon Granger Hospital
 - d. Elkhart General Hospital
 - e. St. Joseph Plymouth Medical Center
5. What is unified command?
 - a. Having multiple incident commanders at different locations of a large incident scene
 - b. A team effort in managing a scene, utilizing the expertise from multiple agencies and functions; allowing all agencies with geographic or functional responsibility for an incident to assign an incident commander
 - c. A way for multiple organizations manage and disseminate consistent, accurate, and timely information to the public and media during incidents
 - d. A way to bridge between two or more organizations to facilitate communication, coordinate activities, and ensure mutual understanding

6. What is the definition of a mass casualty incident?
 - a. Any situation involving the injury or illness of a quantity of persons sufficient to overwhelm the usual emergency medical services system in a short amount of time
 - b. Any scene with 5 or more patients
 - c. Any situation where there are multiple fatalities which overwhelms the responding resources
 - d. Any situation where the destination hospitals are already at capacity and are not able refuse accept any additional patients
7. What is the primary purpose of hospital control during a mass casualty incident?
 - a. Directing transport destinations for EMS
 - b. Acting as a liaison between hospitals and the on-scene personnel and notifying regional hospitals of the MCI
 - c. Setting up a field hospital to avoid having to transport patients to the hospital
 - d. Acting as hospital incident command and running triage for the hospital(s)
8. Who is responsible for providing emergency medical response training to the EMS practitioners and responders?
 - a. Memorial Hospital South Bend
 - b. St. Joseph Mishawaka Medical Center
 - c. Medical directors
 - d. Each individual agency
9. With what 3 MCI functions will a tabletop exercise help responders become familiar?
 - a.
 - b.
 - c.
10. At what level of EMS Plan activation will hospital control be automatically activated?
 - a. EMS Plan 1
 - b. EMS Plan 2
 - c. EMS Plan 3
 - d. EMS Plan 4
 - e. EMS Plan 5
11. Who should be contacted for online medical control when a medical director is not available?
 - a. Memorial Hospital Emergency Department
 - b. St. Joseph Mishawaka Medical Center Emergency Department
 - c. Hospital Control
 - d. Medical Control is not available during an MCI and guidelines and standards of care are suspended
12. Who is the ultimate authority on scene?
 - a. Public Information Officer
 - b. EMS Branch Director
 - c. Incident Commander
 - d. Liaison Officer

13. Who serves as the on-scene representative for Hospital Control and is responsible for maintaining in communication with Hospital Control?
 - a. Public Information Officer
 - b. EMS Branch Director
 - c. Incident Commander
 - d. Triage Officer
14. What are three prerequisite criteria that must be met to hold the position of EMS Branch Director?
 - a.
 - b.
 - c.
15. What three positions, if filled, report to the EMS Branch Director?
 - a.
 - b.
 - c.
16. To whom does the EMS Branch Director report?
 - a. Incident Commander
 - b. Logistics Section Chief
 - c. Operations Section Chief
 - d. Accountability Officer
17. What triage system is used in the St. Joseph County EMS system?
 - a. START
 - b. SALT
 - c. JumpSTART
 - d. ESI Triage
18. What are the 4 lifesaving interventions permitted (level appropriate) within the triage system used in St. Joseph County EMS?
 - a.
 - b.
 - c.
 - d.
19. Which position is responsible for relaying medical control requests to Hospital Control when the medical director is not available?
 - a. Triage Group Supervisor
 - b. Treatment Group Supervisor
 - c. Transport Group Supervisor
 - d. Incident Commander
20. Who will determine the patient's destination hospital?
 - a. EMS Branch Director
 - b. Triage Group Supervisor
 - c. Transportation Group Supervisor
 - d. Hospital Control

21. In ICS, what is the purpose of the medical unit?
- Oversees all EMS operations on the scene
 - A specialized unit dispatched by the hospital for on-site surgical intervention, ie a mobile operating rooms
 - Treatment of injured first responders
 - To provide treatment and transportation to injured casualties
22. Ideally, when activating an MCI plan and relaying the number of expected patients, which patients should be included in that number for asset planning purposes?
- All patients (Triage green through black)
 - Only those triaged green, yellow, and red
 - Only those triaged as dead (black)
 - Only those triaged yellow, red, and grey
23. What are the special health focuses that should be relayed to the PSAP and Hospital Control?
- -
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24. At a minimum, what information should be relayed to PSAP during the initial scene size-up of an MCI?
- -
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25. What color ribbon should be placed on a patient who is contaminated *and still needs to be decontaminated*?
- Green
 - Red
 - Pink
 - Orange
26. Where should triage *tags* be placed onto patients by EMS? (choose all that apply)
- Ambulance
 - CCP
 - At the point of injury
 - Hospital
27. When leaving a patient in place (at the point of injury, for example in a room or vehicle), what color ribbon should be used to mark that location so other first responders know a victim has been left inside and has already been triaged?
- Green
 - Red
 - Pink
 - Orange

28. What resource should be requested for an organophosphate scene where multiple victims will overwhelm the available medication supplies brought to the scene by EMS?
- MEDRUN Pack
 - CHEMPACK
 - EMS Plan 5
 - Hospital pharmacist response with requested resources
29. In which “zones” are RTF personnel permitted to function? (choose all that apply)
- Hot zone
 - Warm zone
 - Cold zone
 - Care under fire zone
30. How many ambulances are expected to be on scene when an EMS plan 2 has been requested?
- 3
 - 5
 - 7
 - 9
31. What EMS plan needs to be requested to get 10 ambulances to the scene?
- EMS Plan 1
 - EMS Plan 2
 - EMS Plan 3
 - EMS Plan 4
32. How are patient destinations recorded?
- ESO and the ePCR
 - EMS MCI Transportation Log
 - It’s a disaster, transportation logs are not necessary
 - PSAP tracks it for us
33. When transporting a patient, what four pieces of information should be relayed to the transport group leader, PSAP, and Hospital Control?
- -
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34. When should the decontamination ribbon be removed from a contaminated patient?
- After initial decontamination
 - After final decontamination
 - After transportation to the destination hospital
 - Not until the end of the MCI
35. How is the CHEMPACK requested?
- Request the CHEMPACK from EMA
 - Request the CHEMPACK from Hospital Incident Commander
 - Request the CHEMPACK from the medical director or hospital emergency department
 - Request the CHEMPACK from the CDC

36. After incident command has been established and the scene has been deemed safe, what is the role for the first arriving EMS unit?
- a. Begin triage
 - b. Immediately transport the closest victim to the ambulance
 - c. Establish the EMS Branch
 - d. Stage until told what to do by incident command (IC)
37. At a minimum, how often should hospital control be in contact with the Incident Commander, EMS Branch Director, and/or the Transportation Officer?
- a. 20 minutes
 - b. 30 minutes
 - c. 60 minutes
 - d. Once every operational period
38. When all positions have been filled, who is responsible for establishing and marking landing zones (LZs) for air ambulances?
- a. Ground transportation unit leader
 - b. Operations section chief
 - c. Air transportation unit leader
 - d. EMS Branch Director
39. Name 4 things for which the treatment group supervisor is responsible?
- a.
 - b.
 - c.
 - d.
40. Who is responsible for performing initial and periodic inventory of available supplies and overseeing the rationing of expendable supplies to make sure supplies are ready and available during the incident?
- a. Operations Chief
 - b. Resource Unit Leader
 - c. Treatment Group Leader
 - d. Hospital Control