



## **Notes/Educational Pearls**

### **Key Considerations**

#### **1. Communication Barriers**

- a. Language Barriers:
  - i. Expressive and/or receptive aphasia
  - ii. Nonverbal
  - iii. Fluency in a different language than that of the EMS professional
  - iv. Examples of tools to overcome language barriers include:
    - 1. Transport of an individual who is fluent in the patient's language along with the patient to the hospital
    - 2. Medical translation cards
    - 3. Telephone-accessible services with live language interpreters
    - 4. Methods through which the patient augments his/her communication skills (e.g., eye blinking, nodding) should be noted, utilized as able, and communicated to the receiving facility
    - 5. Electronic applications for translation
- b. Sensory Barriers:
  - i. Visual impairment
  - ii. Auditory impairment
  - iii. Examples of tools to overcome sensory barriers include:
    - 1. Braille communication card
    - 2. Sign language
    - 3. Lip reading
    - 4. Hearing aids
    - 5. Written communication

#### **2. Physical Barriers:**

- a. Ambulatory impairment (e.g., limb amputation, bariatric)
- b. Neuromuscular impairment

#### **3. Cognitive Barriers:**

- a. Mental illness
- b. Developmental challenge or delay

### **Pertinent Assessment Findings**

- 1. **Assistance Adjuncts.** Examples of devices that facilitate the activities of daily living for the patient with functional needs include, but are not limited to:
  - a. Extremity prostheses
  - b. Hearing aids
  - c. Magnifiers
  - d. Tracheostomy speaking valves
  - e. White or sensory canes
  - f. Wheelchairs or motorized scooters
- 2. **Service Animals**

As defined by the **American Disabilities Act**, “any guide dog, signal dog, or other animal individually trained to do work or perform tasks for the benefit of an individual with a disability, including, but not limited to guiding individuals with impaired vision, alerting individuals with