

*Kingsborough
Community
College*



*Department of Allied Health
Paramedic Student Handbook
Fall 2023– Summer 2024*

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ABOUT

On behalf of the Faculty and staff of the Department of Allied Health, mental health and human services EMS programs we are pleased to welcome you to the Paramedic Program. We hope that you will have a gratifying, scholarly journey as a Paramedic student here at Kingsborough Community College.

This handbook contains valuable information to facilitate your achievement of academic and professional excellence as a paramedic student. **Please keep it as a reference throughout your EMS education. It is a supplement to the College Catalog and College Student Handbook. All information contained in this handbook is subject to change. Changes will be published as they occur.**

The Handbook is on the department website – Please download it if you lose this copy.

The Program Handbook for the Kingsborough Community Colleges Paramedic Program has been developed to provide directives regarding the operations of the program. The handbook contains information useful to students as well as details of program policies and procedures.

Material contained in the handbook is based on provisions outlined by the New York State Department of Health Bureau of EMS and the Commission on Accreditation of Allied Health Education Programs.

Please be advised that while new and revised policies may be distributed on an annual basis, students will follow all policies as published in the Institutional Catalog and/or Program Handbook they received when they enrolled in the Program.

The application of the handbook with respect to any specific procedure or policy is subject to modification depending upon the circumstances and requirements of a particular case. The Kingsborough community college Paramedic Program reserves the right to modify or amend provisions at any time.

Kingsborough Community College is institutionally accredited by MSCHE, Middle States Commission On Higher Education.

3624 Market Street, Philadelphia, PA 19104-2680. Tel: 267-284-5000. Fax: 215-662-5501
www.msche.org

For a complete accreditation statement, please follow the link below
<https://www.msche.org/institution/0283/>

OVERVIEW

Introduction

The field of pre-hospital care is responsible for the initial treatment and transportation of individuals suffering from acute illness or sudden injury. Working within established Emergency Medical Services (EMS) systems, and the guidelines set forth by the United States Department of Transportation and the New York State Department of Health-Bureau of EMS, the EMT-Paramedic is the highest level of pre-hospital care provider. Working under the authority of a medical director, the EMT-Paramedic is responsible for the recognition and treatment of life-threatening and potentially life-threatening medical and traumatic conditions, initiating proper advanced level treatments including but not limited to advanced airway management, IV access, EKG monitoring, defibrillation, cardioversion, external pacing, and medication administration. The EMT-Paramedic also documents all care and treatment rendered.

Paramedic students build upon the foundation of their EMT basic skills and are prepared to provide advanced level care in the pre-hospital setting. Paramedics must be highly skilled in patient assessment and competent in all skills required for advanced level procedures. The course of study is designed to teach students the principles, as well as the clinical and technical skills needed for the practice of advanced level pre-hospital care.

Mission

The Kingsborough Community College's Paramedic Program has made a firm commitment to the education of students in the field of pre-hospital care.

Our mission is the training of EMS Providers who are skilled individuals, qualified by technical and didactic education, to provide emergency medical services using the latest diagnostic and treatment modalities.

Goals

The Paramedic Program offers a program of emergency medical services training at the certificate level. The program's goal is to prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains with or without exit at the AEMT and or EMT and or emergency medical responder level. To graduate, students must have:

- Completed all didactic objectives, including: passing all courses by achieving a minimum passing grade.
- Completed all clinical objectives, including: clinical performance and competency, problem solving skills, critical thinking skills, communication skills, professional development and growth.
- Complete and pass the affective domain evaluation outlined by the accrediting agencies and conducted by program faculty.
- Participate as a team leader working with different team members to effectively diagnose and treat patients with varying medical illnesses and traumatic injuries.

The program identifies benchmarks to provide a standard by which the effectiveness of the program in achieving its goals can be evaluated. An assessment plan is in place and can be obtained from the program director.

Objectives

Upon graduation, students will receive a certificate of completion and are prepared to meet the requirements to sit for the certification exams administered by the National Registry of Emergency Medical Technicians and/or New York State Department of Health Bureau of EMS. Specifically, our objectives are to have our graduates perform effectively understanding and utilizing national, state and local protocols by:

- Applying knowledge learned to provide pre-hospital and emergency medical care

OVERVIEW

- Effectively communicating with patients and other health care providers
- Providing EMS care at the level of an entry-level paramedic
- Demonstrating high standards of pre-hospital and emergency medical practice in skill performance and patient advocacy
- Providing competent and safe care in a variety of settings to a group of patients with diverse needs across the lifespan by demonstrating knowledgeable decision making and judgment based on critical thinking, clinical competence, accountability and collaboration with the patient and healthcare team
- Understanding the benefits of professional growth, life learning, advanced degrees and professional societies

Background

This program will develop both basic and advanced skills in the recognition of signs and symptoms of illness and injuries, and in the proper procedures for both basic and advanced life support. The purpose of the training is to ensure INDIVIDUAL COMPETENCY by each student through the successful completion of all learning objectives. The curriculum followed currently meets and exceeds the New York State Department of Health EMS Bureau and the United States Department of Transportation Paramedic National Standard Curriculums. The paramedic program consists of didactic (lecture) instruction, practical skills training, clinical rotations and field internship experience. Graduates of the Kingsborough Community College Paramedic Program have found employment in private ambulance services, voluntary hospitals providing paramedic ambulances for the 911 system, and with FDNY.

Accrediting Agency

The Paramedic Program is programmatically accredited by the Commission on Accreditation for Allied Health Education Programs (CAAHEP). Upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (COAEMSP). To contact CoAEMSP: 214-703-8445 www.coaemsp.org. The college is required to comply with their standards, *Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions*. If any violations occur, the college's policy is to investigate and correct the violation and ensure compliance with the standards in a timely fashion. To view a copy of the standards please visit the CAAHEP website at www.caahep.org. If a student feels that the college is not in compliance with the standards they can contact CAAHEP at the address and phone number below:

Commission on Accreditation for Allied Health Education Programs

9355 - 113th St. N, #7709

Seminole, FL 33775

727-210-2350

Department of Health

The Kingsborough Community College paramedic program is approved by the New York State Department of Health. Students may bring course complaints to New York State DOH EMS Bureau:

New York State Department of Health Bureau of Emergency Medical Services

547 River St. Rm 530

Troy, New York 12180-2216

518-402-0996

OVERVIEW

Important Addresses

National Registry of Emergency Medical Technicians

Rocco V. Morando Building
6610 Busch Blvd.
P.O. Box 29233
Columbus, Ohio 43229
614- 888-4484

Overview of the Program

Understanding is the key to good clinical judgment. The paramedic program has four distinct components: didactic activities, practical skills labs, clinical rotations and field internships. This combination will provide the paramedic student with the cognitive ability, technical proficiency, Affective Domain and clinical competency expected of entry-level paramedics. Successful completion of the program requires that the paramedic student demonstrate competence in all four areas.

The didactic component of the program takes the form of lectures or other learning activities, which are designed to impart the information the paramedic students' needs in order to understand the rationale behind the many pre-hospital treatments and skills. Lecturers are selected who have expertise in the topic area and have experience or extensive knowledge of pre-hospital care. Lectures offer the students the opportunity to ask questions and gain deeper understanding of the subject matter. It is assumed that all students will have already completed all required outside hours including reading and assignment for a particular lecture. This preparation will allow the student to gain a deeper understanding of the topic.

The practical skills labs are designed to teach the paramedic student the advanced level skills required of an entry level paramedic and give the student the opportunity to perfect these techniques in a controlled environment. Under the supervision of Lab Instructors, all of whom have extensive pre-hospital care experience, the student performs required skills and receives feedback from the instructor. Good advanced life support is not possible without an excellent foundation in basic life support skills. Advanced paramedic skills will not be limited to those tested on the final practical exam or authorized by the NYC REMAC, since other skills are often allowed in other systems and protocols do change.

Practical lab sessions will also include simulated situations in which the student will perform skills on mannequins as a medical or trauma situation develops. As the course progresses, these scenarios will become increasingly more complex. They will incorporate patient assessment skills, basic and advanced skills as well as decision making ability. Students will be required to demonstrate the integration of skills and knowledge to provide appropriate patient care, select the correct treatment modalities, communicate with team members and present the case to a medical control physician.

Clinical rotations allow students the opportunity to apply theoretical knowledge to actual patient care situations and perform advanced level skills on actual patients. Clinical rotations will integrate and reinforce the didactic and practical skills components of the program. The clinical rotations are scheduled with facilities that have entered into Affiliation Agreements with the paramedic program. The students are able to practice the skills that they will use in the care and treatment of their patients, under the supervision of the clinical preceptor. The students will be able to participate in all facets of care, beginning with observation and taking on additional responsibilities under the guidance of the preceptors. It is expected that students will gradually make the transition from observer to participant to team leader in these clinical rotations.

Phase III of the field internship experience allows the student to "put it all together" and demonstrate mastery of the integration of the didactic, skills and clinical portions of the program. This portion of the clinical experience is not instructional, but rather an evaluative phase of the program. Students will be expected to demonstrate the competence of an entry-level paramedic working within the EMS system

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BOARDS AND COMMITTEES

Members of the Advisory Board

Administrative Members

Directors
Managers
Director of Development & Planning
Recording Secretary (Non-Voting Member)

Faculty Members

Program Directors
Certified Instructor Coordinators; CLI & CLT

Community of Interest Advisors

A meeting of the Advisory Board will be considered to have a quorum when at a minimum 8 members are present of which at a minimum 3 are members of the Community of Interest.

Members of the Program Committee

Administrative Staff Members

Directors
Managers
Director of EMS
Recording Secretary (Non-Voting Member)

Faculty Members

Program Director
Medical Director
Certified Instructor Coordinators
Lab Instructor Coordinators

A meeting of the Program Committee will be considered to have a quorum when at a minimum 4 members are present.

ROLE AND RESPONSIBILITIES OF THE PARAMEDIC STUDENT

Student Rights and Responsibilities

Education is a cooperative effort between the expertise of the Faculty and willingness of the student to learn. The Paramedic Faculty endorses the fact that you, the student, have certain rights when you enroll in the Paramedic Program as well as responsibilities.

The student has a right to:

- Accurate, organized, relevant, cohesive and quality paramedic education and materials.
- Faculty who are knowledgeable, clinically experienced, up-to-date and able to communicate information effectively.
- Quality classroom instruction that is punctual, clearly communicated, stimulating, and presented in a positive learning environment that is free of bias and/or hazards.
- Quality clinical instruction that is safe, provides a variety of experiences, and guides you toward effective paramedic practice.
- Fair, impartial, and prompt evaluation of your performance, both theory and clinical.
- Support services to facilitate your participation in the learning process.
- Regular availability of your Faculty (scheduled as their office hours) for advice and assistance with academic or clinical matters.

The student has a responsibility to:

- Be in charge of your own learning (which includes adherence to KCC, the program and the NYSDOH attendance policies). Commit yourself to learning paramedic theory and practice through whatever means necessary for you. Be aware of your strengths as a learner and learn to live with or overcome your weaknesses. Be an active participant in all learning experiences.
- Learn from the expertise and knowledge of the Faculty. Be prepared for all classes and clinical experiences, submit all assignments as scheduled.
- Attend class promptly and regularly. Be attentive to classroom activities, avoid talking out of turn, conversing with friends or sleeping during a classroom presentation.
- Follow accepted standards of behavior for Paramedics as well as the KCC codes and standards for behavior on and off the campus.
- Be prompt and reliable for all assignments and activities. Remember that you are a guest in the clinical agency and demonstrate appropriate social manners. Learn and abide by the agency's clinical policies and procedures.
- Remember that the primary responsibility of the staff is patient care, not monitoring or instructing you.
- Allow sufficient time for the Faculty to grade assignments with fairness and thoughtfulness. Make appointments with Faculty to discuss grades, issues and concerns

Responsibilities

Paramedic Students are expected to meet all requirements as stated in the *National Standard Curriculum* published by the United States Department of Transportation National Highway Traffic and Safety Administration, (which includes all NYS DOH requirements) as well as complying with the guidelines, policies and protocols developed by the Kingsborough community college's Paramedic Program. The roles and responsibilities of paramedic students include the following:

- Applying their best effort to develop knowledge and skills as a paramedic student
- Reading and understanding the Paramedic Program Handbook and adhere to the policies and procedures contained in it
- Adhering to all the college Paramedic Program and Clinical Affiliate's policies and procedures.
- Making every attempt to arrive prepared and on time for classes and clinical rotations
- Preparing for all class sessions and submitting all assignments on time
- Making every attempt to study and prepare for classes, practical skills sessions and clinical rotations
- Exercising complete honesty and integrity during all aspects of the program
- Maintaining patient confidentiality in activities associated with the program
- Treating the faculty, staff rotation preceptors, fellow students and patients with respect and dignity

ROLE AND RESPONSIBILITIES OF THE PARAMEDIC STUDENT

- Submitting all required documentation in a timely manner
- Making payments on time, in accordance with agreed-upon payment plans, if applicable
- Demonstrating proper decorum and behavior with respect to faculty and fellow students, as well as to preceptors, patients, family and hospital staff when on clinical rotations
- Maintaining classrooms and practical skills lab and show respect for equipment and supplies found in those rooms
- Following all treatment protocols and operating within the scope of care and in accordance with program policies and procedures
- Completing all clinical paperwork in a timely fashion according to Paramedic Program Policies and Procedures
- Informing the Paramedic Program director of any changes in name, address or telephone number(s)
- Maintaining current certifications as specified by NYS DOH guidelines and providing copies of these cards to the Paramedic Program Director as they are renewed (i.e. EMT certification)
- Informing the Paramedic Program Director of any issues or problems, which are affecting their performance in the paramedic program in a timely manner.

ACCEPTANCE POLICY

Admission Statement

Beginning in the Fall of 2020, CUNY has established a policy where the University will consider students to be eligible for admission consistent with the regulations of the New York State Education Department (NYSED) that make professional licensure available not only to U.S. citizens but to non-citizens so long as they are "not unlawfully present in the United States," including those with Deferred Action for Childhood Arrivals (DACA) and those who are permanently residing in the United States under color of law (PRUCOL).

To be admitted or advance into a NYSED-approved licensed health professions program in fall 2020 and beyond, students must provide documentation for one of the categories listed in the attached policy. Namely, applicants may demonstrate eligibility through documents that verify that they: 1) are U.S. citizens, 2) have legal permanent resident status, or 3) are in another eligible category set forth in the policy, generally through presentation of an employment authorization document (see useful document from U.S. Citizen and Immigration Services: List of Documents that Establish Identity and Employment Authorization).

Applicants may demonstrate eligibility through documents that verify that they meet the required criteria. The most common documents include:

1. Proof of U.S. citizenship through a birth certificate, U.S. passport, naturalization certificate, or a certificate of citizenship.
2. Proof of legal permanent resident status with what is known as a "Green Card".
3. Proof of various eligible categories, listed below, generally through an employment authorization document (EAD) or other satisfactory documentation.

Eligible immigration categories:

1. International student with F-1 status
2. Asylee
3. Refugee
4. Temporary Protected Status (TPS)
5. Deferred Action for Childhood Arrivals (DACA)
6. Individuals paroled into the United States whose parole has not expired
7. Persons residing in the U.S. pursuant to an Order of Supervision
8. Persons granted a stay of deportation/removal
9. Persons granted an indefinite voluntary departure
10. Persons on whose behalf an immediate relative petition has been approved
11. Persons who have filed an application for adjustment of status to permanent resident
12. Persons granted Deferred Action Status
13. Persons who entered and have continuously residency in the U.S. before 01/01/1972
14. Persons granted suspension of deportation or cancellation of removal
15. Cuban/Haitian entrants
16. Persons with a pending application for asylum, withholding of removal or deportation, protection under the Convention Against Torture (CAT), cancellation of removal, or TPS
17. Persons in T or U non-immigrant status
18. Self-petitioner under the Violence Against Women Act
19. Other persons living in the U.S. who are not unlawfully present

Here is a summary of the documents that a student should be able to provide:

1. US birth certificate With a State Issued Driver's License or State issued identification card
2. US issued Passport
3. Passport of the Federated States of Micronesia and the Republic of the Marshall Islands
4. Form I-551 permanent Resident Green card
5. Foreign Passport with I-551 stamp

ACCEPTANCE POLICY

6. Form I-776 Employment Authorization Documentation
7. Form I-94 Arrival/Departure Record
8. Form I-20 accompanied by Form I-94

Qualifications for acceptance into the paramedic program.

1. Applicants must be 18 years of age.
2. Applicants must be in good mental and physical health, free from any physical handicaps which would interfere with their work.
3. Applicants must meet the "Technical Standards for Admission" (see below)
4. Applicants must have a high school diploma (GED is acceptable)
5. Applicants must have a current NYS EMT certification (must be valid for the duration of the paramedic course up to and including the date of the scheduled New York State Written Certification Examination at the end of the course)
6. Applicants must successfully pass the program interview, pass the medical screening and back ground check in addition to documented recommendation by the program committee board including the approval of the program medical director.

Any applicant who does not meet the qualifications outlined above is ineligible for admission to the program.

EMT-B Certification

All students must have NYS EMT or higher certification that is valid for the duration of the entire length of the Paramedic Program.

In the event that the student's certification is due to expire prior to the completion of the Paramedic Program, it shall be the responsibility of the student to enroll in an approved NYS DOH EMT Refresher Course. Proof of enrollment in a refresher course must be provided to the program's administrative office. EMT refreshers must be taken at the student's own expense and cannot interfere with the Paramedic class. If the student fails the refresher program and/or the EMT Certification Exam and subsequently their NYS EMT certification expires, they will be considered no longer certified and will be dropped from the Paramedic Program. Upon receiving new EMT certification, the student must supply a copy of the new certification card to the Program Director.

Technical Standards:

This policy outlines the technical standards that each applicant/student must meet.

Each applicant/student must possess certain physical and mental attributes to be able to complete the paramedic program. Applicants/Students must meet these requirements throughout their enrollment at the Kingsborough community college. It is the applicant's/student's responsibility to notify the program of any changes that will not allow them to meet the technical standards below:

- Communicate effectively via telephone and radio equipment
- Lift, carry and balance up to 125 pounds (250 pounds with assistance)
- Interpret oral, written and diagnostic form instructions
- Use good judgment and remain calm in high stress situations
- Be unaffected by loud noises and flashing lights
- Function efficiently without interruption throughout an entire work shift
- Calculate weight and volume ratios
- Read English language manuals and road maps
- Accurately discern street signs and addresses
- Interview patients, patient family members and bystanders

ACCEPTANCE POLICY

- Document, in writing, all relevant information in prescribed format, in light of legal ramifications of such
- Converse, in English, with coworkers and hospital staff with regard to the status of the patient
- Perform all tasks related to the highest quality patient care
- Bend, stoop and crawl on uneven terrain
- Withstand varied environmental conditions such as extreme heat, cold and moisture
- Work in low light situations and confined space
 - Work with other providers to make appropriate patient care decisions

Any applicant who does not meet the technical standards as outlined above is ineligible for admission to the program.

- Any student whose status changes while enrolled and no longer meets the technical standards as outlined above may not be allowed to continue to progress through the program.

Qualifications for acceptance into the paramedic program for returning students:

Terminated Students due to failure to maintain satisfactory academic progress can reapply to the paramedic program and must:

- Have a current NYS EMT certification (must be valid for the duration of the paramedic course up to and including the date of the scheduled New York State Written Certification Examination at the end of the course)
- Successfully pass the program interview, pass the medical screening and back ground check in addition to documented recommendation by the program committee board including the approval of the program medical director.
- Submit an action plan to successfully execute the individualized learning contract issued by the program committee members.
- Submit a current job reference letter on employer's letter head.

Terminated Students due to Ethical/ professional conduct violation must submit a written approval from the program medical director in order to reapply to the paramedic program

ACCEPTANCE POLICY

Criminal Conviction Policy

A student who has been involved in a criminal proceeding or who has been charged with or convicted of a crime should be aware that a conviction may not be an automatic bar to certification. Students who have been convicted of a misdemeanor or felony should contact the New York State Department of Health at **518-402-0996 for further instruction and National Registry at 614-888-4484.**

Students with a criminal conviction should be aware that even though they may graduate from the program, they may not be eligible to sit for the NYS DOH EMS Certification Examination which is required in New York State to be allowed to work as an EMT-Paramedic. A criminal conviction may also make the student ineligible to sit for the National Registry Exam for Paramedics.

FUNCTIONAL JOB DESCRIPTION

All students will be required to sign a Certification of Eligibility upon enrollment in the Paramedic Program. By signing this form, the student states that he/she has read and understood the functional job description of an EMT-Paramedic and either has no conditions that would preclude him/her from safely and effectively performing all of the functions required for that level of training or will request an accommodation for the NYS Written Examination.

Qualifications:

- Complete the *Application for Emergency Medical Services Certification* (DOH-65), including affirmation regarding criminal convictions
- Successfully complete an approved New York State EMT course
- Achieve a passing score on the practical and written certification examinations
- Must be at least 18 years of age prior to the last day of the month in which they are scheduled to take the written certification examination
- Knowledge and Skills required show need for high school or equivalent education
- Ability to communicate effectively via telephone and radio equipment
- Ability to lift, carry and balance up to 125 pounds (250 pounds with assistance)
- Ability to interpret oral, written and diagnostic form instructions
- Ability to use good judgment and remain calm in high stress situations
- Ability to be unaffected by loud noises and flashing lights
- Ability to function efficiently without interruption throughout an entire work shift
- Ability to calculate weight and volume ratios
- Ability to read English language, manuals and road maps
- Ability to accurately discern street signs and addresses
- Ability to interview patients, patient family members and bystanders
- Ability to document, in writing, all relevant information in prescribed format in light of legal ramifications of such
- Ability to converse, in English, with coworkers and hospital staff with regard to the status of the patient
- Possesses good manual dexterity with ability to perform all tasks related to the highest quality patient care
- Ability to bend, stoop and crawl on uneven terrain
- Ability to withstand varied environmental conditions such as extreme heat, cold and moisture
- Ability to work in low light situations and confined spaces
- Ability to work with other providers to make appropriate patient care decisions

Competency Areas:

The EMT-P

Must be capable of utilizing all EMT-B and AEMT-Intermediate skills and equipment. Must be able to perform under Advanced Cardiac Life Support (ACLS) and Basic Trauma Life Support (BTLS) standards. Must be knowledgeable and competent in the use of a cardiac monitor/ defibrillator and intravenous drugs and fluids. The EMT-Paramedic has reached the highest level of pre-hospital care certification.

Description of Tasks:

- Responds to calls when dispatched.
- Reads maps
- Drives ambulance to emergency site using most expeditious route permitted by weather and road conditions.
- Observes all traffic ordinances and regulations.
- Uses appropriate body substance isolation procedures.
- Assesses the safety of the scene.
- Gains access to the patient.
- Assesses extent of injury or illness.
- Extricates patient from entrapment.

FUNCTIONAL JOB DESCRIPTION

- Communicates with dispatcher requesting additional assistance or services as necessary.
- Determines nature of illness or injury.
- Visually inspects for medical identification emblems to aid in care (medical bracelet, charm, etc.)
- Uses prescribed techniques and equipment to provide patient care.
- Provides additional emergency care following established protocols.
- Assesses and monitors vital signs and general appearance of patient for change.
- Makes determination regarding patient status and priority for emergency care using established criteria.
- Reassures patient, family members and bystanders.
- Assists with lifting, carrying and properly loading patient into the ambulance.
- Avoids mishandling patient and undue haste.
- Determines appropriate medical facility to which patient will be transported.
- Transports patient to medical facility providing ongoing medical care as necessary in route.
- Reports nature of injury or illness to receiving facility.
- Asks for medical direction from medical control physician and carries out medical control orders as appropriate.
- Assists in moving patient from ambulance into medical facility.
- Reports verbally and in writing observations of the patient's emergency and care provided (including written report(s) and care provided by Certified First Responders prior to EMT-B/AEMT arrival on scene) to emergency department staff and assists staff as required.
- Complies with regulations in handling deceased, notifies authorities and arranges for protection of property and evidence at scene.
- Replaces supplies, properly disposes of medical waste.
- Properly cleans contaminated equipment according to established guidelines.
- Checks all equipment for future readiness.
- Maintains ambulance in operable condition.
- Ensures cleanliness and organization of ambulance, its equipment and supplies.
- Determines vehicle readiness by checking operator maintainable fluid, fuel and air pressure levels.
- Maintains familiarity with all specialized equipment.

The Functional Job Description is derived from the NYS DOH Bureau of EMS Policy # 92-04. The purpose of the form is to ensure compliance with the Americans with Disabilities Act (ADA).

The following is the procedure:

1. The student will sign a statement indicating that he/she has / does not have any condition that would preclude him/her from safely and effectively performing all of the functions required for that level of training.
2. The signed form will become part of the student's permanent record.

Program Assessment Policy

ASSESSMENT POLICY

Students will be evaluated every semester on all three component of the paramedic program including Cognitive, Psychomotor and affective domains. Students must pass all three with a minimum average of C (75%).

All courses are progression courses and course average must be a minimum of C (75%).

A student must pass all courses in the program in order to graduate from the program

A student must pass all courses in a semester in order to progress to the next semester in the program.

A student must pass the affective domain evaluation in order to pass the course.

If a student fails one course in a semester, they face termination from the program.

A progression course is defined as a course that is delineated as a pre-requisite course for a course in the following semester. All required pre-requisite courses are.

EMS 210	EMS 211 Lab and Clinical
EMS 220	EMS 221 Lab and Clinical
EMS 230	EMS 231 Lab and Clinical
EMS 240	EMS 241 Lab and Clinical

Laboratory Evaluations

There are many skills that the paramedic must be able to perform. Some of these skills are basic life support skills; others are advanced life support skills that are considered to be New York City R.E.M.A.C. approved skills. Some skills are not approved R.E.M.A.C skills but are often used in other systems and should be familiar to all paramedics.

Good advanced life support cannot be performed unless paramedics have excellent basic life support skills. Students come from a variety of training and experience backgrounds. It is a goal of the program to upgrade the basic life support skills of all participants to the point that they could be considered excellent.

Laboratory skill training are scenarios and simulations will require students to make judgments, apply - skill knowledge, didactic and pharmacological knowledge, protocol knowledge, and patient assessment skills in the treatment of dynamic and emergency patient care situations.

Students will be evaluated in terms of their ability to move with, make appropriate application to, and respond to medical and/or trauma situations as they develop and change. It is the goal of the course to train "thinking paramedics" who can select the appropriate intervention as needed. The student who is demonstrably having difficulties in this area will be counseled.

Skills will be evaluated a number of times during the course. During skill modules students will have ample skill practice time. Practical skills evaluations will be graded on a pass/fail basis, where all skills must be passed for the student to pass the practical evaluations. Students will have a maximum of four reevaluations of a skill (five evaluations total). If a student has not passed all skill evaluations by the date of their final written exam they may face disciplinary action including but not limiting to dismissal from the program.

Program Assessment Policy

The following table represents the minimum number of times a student needs to practice a skill during skill sessions:

Airway Skills		Trauma	
Alternative airway	6	Hemorrhage Control	5
BVM - Adult	10	Joint Splinting	5
BVM - Pediatric	10	Long Bone Splinting	5
CPAP / PEEP	3	Needle Decompression	10
ET - Adult	12	Seated Spinal Immobilization	5
ET - Extubation	12	Supine Spinal Immobilization	5
ET - Pediatric	12	Traction Splinting	5
FBAO - Adult	6	Trauma Intubation	8
FBAO - Pediatric	6	Pt Assessment / Scenarios / Megacode	
Nasal Intubation	6	Megacode - Adult Cardiac	10
Needle Cricothyrotomy	10	Megacode - Adult Medical	10
Sterile Suctioning	6	Megacode - Adult Trauma	5
Cardiology		Megacode - Pediatric Cardiac	10
12 Lead Placement	8	Megacode - Pediatric Medical	10
12 Lead Interpretation	5	Megacode - Pediatric Trauma	5
Cardioversion - Adult	17	BLS Pt Assessment - Medical	2
Cardioversion - Pediatric	17	BLS Pt Assessment - Trauma	2
Defibrillation - Adult (Unwitnessed)	17	ALS Pt Assessment – Medical	3
Defibrillation - Adult (Witnessed)	20	ALS Pt Assessment – Trauma	3
Defibrillation - Pediatric	17	Scenario - Adult Cardiac	10
Dynamic Rhythm Interpretation	5	Scenario - Adult Medical	10
Static Rhythm Interpretation	5	Scenario - Adult Trauma	5
Transcutaneous Pacing	17	Scenario - Pediatric Cardiac	10
Medical		Scenario - Pediatric Medical	10
Blood Drawing	12	Scenario - Pediatric Trauma	5
ET Medication Administration	18	Team Leader - Adult	20
Glucometer	5	Team Leader - Pediatric	20
Intramuscular Injection	18	Team Member	50
Intranasal Administration	18		
Intraosseous Access	15		
Intravenous Access	15		
IV Bolus	12		
IV Infusion/Piggyback	10		
Nasogastric / Orogastric Tube Placement	6		
Rectal Administration	15		
Subcutaneous Injection	18		

Students will record each time they practice a skill in their Fisdap account. Each record requires the signature of either the preceptor or a peer. Students who do not meet and/or record the minimum number of practice skills as found above may not be eligible for that skill's practical evaluation.

Program Assessment Policy

The following table represents how the Lab Evaluation grade is determined:

Criteria	Grade
Passed all skills on initial test	100
Passed all skills after first retest	90
Passed all skills after second retest	85
Passed all skills after third retest	80
Passed all skills after fourth retest	75
Failed any skill after fourth retest*	0

**The above table represents grading criteria only. Students must pass ALL skill evaluations in order to progress to the next semester.*

Clinical Evaluations

A student's clinical education is evaluated using two forms; a field internship form and a clinical internship form. The field internship form is used when completing hours and skills on an ambulance and the clinical internship form is used when completing hours and skills in a hospital setting.

Clinical Grade

A student's clinical grade is the average of all field and clinical evaluation forms completed for a specific clinical course.

Research Project/Reflective Essay

During the program course EMS 241 as part of the civic engagement component students will be required to submit a Reflective essay covering the following:

1. Briefly describe how the clinical practicum taught you to apply concepts of Social Responsibility; 2. Explain how the practicum expanded your knowledge of Social Responsibility through your professional responsibility to patient care; 3. What are Paramedic students' views of service learning and how does it relate to civic engagement and meeting community needs?; 4. What are Paramedic students' view of their own transformation into civic leaders' committed to civic engagement?; 5. How did serving under-served communities present challenges to your own assumptions, values, and beliefs. **Reflective Essay= 10% of course grade**

PROGRESSION POLICY

AHA and NAEMT Requirements

A student must pass and obtain certification in all AHA and NAEMT requirements of the program. These requirements include BLS, ACLS, PALS and PHTLS. A student who does not obtain certification upon completing the AHA or NAEMT course provided during the program may complete the requirement as follows:

- Pass and obtain certification by attending a course provided by the College with another cohort or at another location.
- Pass and obtain certification by attending a course provided by an outside agency. Any course taken by an outside agency for certification must be pre-approved by the program director.

Program Assessment Policy

Program Finals

In addition to passing all program courses, students must pass the program final summative evaluation in all 3 disciplines, written; oral and Mega code.

Students who fail the final summative evaluation or its one allowed retest will have failed the program.

Written Evaluation

The written evaluation will be graded on a pass/fail basis. Students must receive a grade of C or better in order to be considered to have passed the final summative evaluations. Students who fail (receive less than a 75%) on the summative evaluation will have failed the program.

Oral Evaluation

The oral evaluation will be graded on a pass/fail basis. Students will be allowed one retest of each component (i.e. 1 Long & 1 Short Scenario) of the Oral Evaluation. Students who fail a final oral evaluation retest will be given one final opportunity to attempt each component with the Program Director, Director of the EMS Institute or Medical Director or his designee as the examiner. Students who fail the oral evaluation will have failed the program.

Megacode Evaluation

The megacode evaluations which consist of an adult and pediatric megacode will be graded on a pass/fail basis. Students will be allowed one retest. Students who fail a megacode evaluation retest will be given one final opportunity with the Program Director or Medical Director or his designee as the examiner. Students who fail the megacode evaluation will have failed the program.

New York State and National Registry Practical Skill Exam

Students must pass the final summative evaluations to be eligible to take the New York State/National Registry Practical Skill Exam. The practical skills exam will follow all National Registry and New York State Department of Health policies in effect at the time of the exam. Students will be eligible to sit for the New York State

and National Registry Written Certification Examination upon successful completion of the Practical Skill Exam.

GRADING POLICIES

97-100	A+	93-96	A	90-92	A-
87-89	B+	83-86	B	80-82	B-
78-79	C+	75-77	C	70-74	C-
66-69	D+	60-65	D	<60	F

A grade of C (75) is the minimum passing grade for all paramedic courses. The final course grade is determined by unit tests, oral presentations, practical examinations and final examinations for the didactic courses. The grade for the Practicum is based on written assignments, evaluations of daily performance and a mid-semester and final evaluation tool.

The student should recognize that the clinical practice of paramedic demands that a professional attitude, work habits, communication skills and manual dexterity are evaluated along with academic readiness. Clinical evaluations are recorded as Satisfactory (S) or Unsatisfactory (U). The Evaluation tool is divided into sections and any skills evaluation section that has been designated as "U" at the end of the course will result in failure of the course (F). A grade of (F) in a Practicum (clinical) course will result in dismissal from the program.

EXAM POLICY

To prevent any exam compromise, exams and quizzes given during the program shall not be redistributed to the students after the exam is completed. Exams are retained for review by the Program Director and will remain in the possession of the Department. Faculty will be available to review exams at a specified time. No tape recording of exam review is permitted at

Program Assessment Policy

any time.

GRADE APPEALS

Students who wish to appeal a grade should follow these guidelines:

1. Speak with the Professor/instructor first to understand the posted grade
2. If you are unclear about the posted grade, or are dissatisfied with the instructor's response, then speak with the Program Director
3. If that is unproductive, speak with the Department Chairperson
4. If that is unsuccessful, file an appeal with the Committee on Academic Review – Room M-386

ATTENDANCE POLICIES

One goal of the paramedic Program is to prepare students to practice competently and professionally in the health care work environment. Among the many desirable qualities are courtesy to others, punctuality for obligations and completion of responsibilities. These qualities are also expected in the work environment.

1. Students are expected to attend all classes and required to attend all laboratory and clinical classes. Attendance is taken at the beginning of each class and serves as a record of a commitment to the course.
2. **A student arriving late for lecture; lab (less than 15 minutes) will be marked as such. Three (3) late arrivals will constitute one day of absence. Students arriving more than 15 minutes will be marked absent and have to make up the session.**
3. Clinical instructors may send a student home that arrives later than 15 minutes as they are considered absent, however, it is solely up to the clinical professor to have student attend for educational purpose.
4. Absences of more than 15% of course hours will result in a grade of WU: this translates to no more than three absences in the clinical agency for the EMS 211 and EMS 231 and no more than two absence in the clinical agency for EMS 221 and EMS 241.
5. If a student is sick or injured and unable to actively participate in providing EMS care for our program, he or she will not be allowed to attend lab/ clinical rotation until he or she submits a return to EMS duties form signed and stamped by the treating physician. A return to EMS duties form is available upon request and must be signed, stamped and submitted to the program director prior to return to lab/clinical.
6. Clinical experience is critical to the success of the Paramedic student. In order to be eligible to graduate, the student must have completed all the required hours, pathologies and patient contacts. Absences not only detract from experience, but also from the total number of countable procedures that can be assigned during a clinical experience. Failure to complete all required hours, pathologies and patient contacts (according to an accreditor specific, regimented policy) will result in the student's inability to sit for the National Board Examination.
7. Assigned breaks during clinical rotations are solely up to the clinical professors.
8. **Under no circumstances students are allowed to leave the clinical site earlier than the assigned time without the permission of clinical professor/ program staff.**
9. **Inaccurate documentation of arrival/ dismissal time on clinical forms/ FISDAP will be deemed unethical and will result in termination from the paramedic program.**

Complete participation in class is possible only when the student is able to focus attention on the class; therefore entering class after it has begun is disrespectful to faculty and classmates

ESSENTIAL PERFORMANCE STANDARDS FOR ADMISSION AND PROGRESSION

Paramedicine/ EMS is a practice discipline with cognitive, sensory, affective and psychomotor performance requirements. Patient safety is dependent on the student's ability to meet the following Essential Performance Standards. These standards are a part of each course. It is important that every applicant meet these standards to be able to engage in learning activities that will not endanger students, faculty or patients.

Program Assessment Policy

ISSUE	STANDARD	EXAMPLES OF ACTIVITIES
Critical Thinking	Critical thinking ability sufficient for clinical judgment.	Identify cause-effect relationships in clinical situations, analyze and develop a plan of activity within an allotted time frame.
Communication	Communication abilities sufficient for accurate and efficient interpretation and communication in English, both verbal and written for interaction with others.	Explain procedures, responding to health care provider orders, write legibly and correctly. Computerization access skills.
Interpersonal	Interpersonal abilities sufficient to interact with individuals, families and groups from a variety of social, emotional, cultural, religious and intellectual backgrounds.	Establish rapport with patients, families, peers and health team members. Perform effectively under stress.
Mobility	Physical abilities sufficient to move from room to room, maneuver in small spaces, navigate stairwells, and bending to retrieve items.	Lifting (at least 125 lbs), positioning and transporting patients. Moving efficiently to meet the needs of the patient and treating team. Participate in care in emergency and non-emergency situations. Have full manual dexterity of the upper extremities, including the neck and shoulders, unrestricted movement of both lower extremities, back and hips and have the ability to touch the floor and to be able to sit, bend, reach, walk and stand for most of the work day.
Motor Skills	Gross and fine motor abilities sufficient to provide safe, effective and skilled care.	Calibrate and use equipment, manipulating medical instruments, and needles. Assembly of power equipment. Operating equipment and devices in emergency situations.
Hearing	Auditory ability sufficient to monitor and assess the needs of the medical team.	React/respond to signals, alarms and other displays indicating immediate needs.
Visual	Visual acuity sufficient for observation and assessment of the needs of the medical team including handling small instrumentation.	Observe pertinent data in the emergency and medical environment that indicate activity for patient safety. Distinguish signs and indicators determining sterility and expiration dates.
Tactile	Tactile ability sufficient for participation in fine skills required on the medical field.	Perform required skills for participation on the medical field.

All students entering the paramedic program must be able to successfully demonstrate the ability to perform all Essential Performance Standards. Determination is made on an individual basis as to whether or not necessary accommodations or modifications can be made reasonably while assuring patient safety.

Program Services

STUDENT SUPPORT SERVICES

Students who need support services during their time at Kingsborough Community College should make an appointment with the **Access-Ability Office** in Room D205 at 368-5175.

Program students find all facilities and programs easily accessible due to the special architectural design of the college and its overall academic structure. Specific assistance such as priority registration, tutoring, reserved parking, disability-related accommodations, individual counseling, adaptive computer equipment, special Biological Sciences Laboratory stations and other technological aids are available to students with disabilities. Prospective students are invited to visit the college before applying for admission. Students who require accommodations should provide adequate documentation. Contact the Access-Ability Center to arrange for a meeting.

Single Stop, Room V-231, ext. 5411

Single Stop connects Kingsborough students to the benefits and resources for which they may qualify. A free 15-minute benefits screening can potentially point the way to help with rent, groceries, and/or health insurance. In addition, students can receive the following free services; legal aid; financial counseling; and tax preparation.

C.O.P.E. Program, Room T4-216, ext. 4660

C.O.P.E. (The College Opportunity to Prepare for Employment Program) provides special services to students who are enrolled in a vocationally-oriented associate degree programs and who receive public assistance through the Human Resources Administration and qualify as Temporary Assistance for Needy Families/TANF (formerly Aid to Families with Dependent Children/AFDC) recipients. The program also offers its services to other students who are low income and the parent of a minor. Services include personal and academic counseling, HRA advisement of policy changes, preparing for HRA appointments and meeting workfare requirements. C.O.P.E. also assists its students with forms that entitle them to childcare and carfare supplements. There is also job preparation and placement assistance including workshops in the application process, interview preparation, and job search and computer tutorials.

Counseling Services

Room D-102

All Kingsborough students are eligible to receive free and confidential personal counseling through the Counseling Services Center, where they will find a staff of trained and caring mental health practitioners who are committed to providing high-quality services, in a safe, supportive, and judgment-free environment, while always respecting students as individuals and as members of a diverse school community. The center's mission is to provide counseling that facilitates meaningful personal growth and the fullest academic development of each individual. The staff assists students with adjustment, behavioral, emotional and/or academic challenges; provides ongoing education to the KCC community regarding mental health issues; and offers consultation and assessment in crisis situations to the KCC community. Through counseling you can gain assistance in developing positive coping strategies to help you balance the challenging demands of school and personal life like stress, trauma, family concerns, loss, anxiety, depression and life transitions. Specific services available include individual and/or group counseling; mental health screenings; psycho-educational workshops; and academic skills workshops. When appropriate, referrals to experts on campus, outside community, and/or mental health agencies are coordinated to provide mental health services. Students' confidentiality and privacy are highly valued.

Academic Expectations

ACADEMIC INTEGRITY

It is expected that students will be honest in ALL academic and clinical situations and perform independently on all tests and written assignments, and turn in work that is their own. Any form of cheating or attempting to cheat will result in a course grade of "F". Students who knowingly collaborate in cheating by assisting others will also be held equally responsible. Learning assistance materials in the lab are for use by all students and are to remain there. Removal of such items by individual students jeopardizes the learning of other students and is considered a breach of integrity.

Students will demonstrate professional behavior on campus and in the clinical area, as evaluated by the faculty.

Unprofessional and unethical behaviors will also result in a failing (F) course grade. Examples, although not inclusive, include belligerent behavior, verbal and non-verbal; lying; rudeness to patients, family members, staff, peers or faculty; threats of physical aggression or any act of violence; removing property (any item) from the clinical agencies or college; illegal drug/alcohol use before or during class or clinical hours.

Plagiarism

Plagiarism is the act of presenting another person's ideas, research or writings as your own. The following are examples of plagiarism, but is by no means an exhaustive list.

- Copying another person's actual words without the use of quotation marks and footnotes attributing the words to their source.
 - Presenting another person's ideas or theories in your own words without acknowledging the source.
 - Using information that is not common knowledge without acknowledging the source.
- Failing to acknowledge collaborators on homework and laboratory assignments.

Electronic Device Abuse- cell phone/pager/text or other communication device

Students are allowed to have cell phones, pagers and other similar devices on campus. However, students may not use these electronic devices during class unless specifically permitted by the faculty member. The use of cell phone and other electronic devices in the classroom during class sessions is a disruption of class and a violation of the Henderson Rules, in the event of a violation of this policy may result in a disciplinary referral and/or require the Students to leave for the remainder of the class. In the event of an emergency, the city University of New York will use an alert system that incorporates the use of electronic devices. Students may have the device on but the setting should be placed on silent, meeting or vibrate setting.

CODE OF ETHICS

EMT Code of Ethics

Professional status as an Emergency Medical Technician or Emergency Medical Technician-Paramedic is maintained and enriched by the willingness of the individual practitioner to accept and fulfill obligations to society, other medical professionals, and the profession of Emergency Medical Technician. As an Emergency Medical Technician-Paramedic, I solemnly pledge myself to the following code of professional ethics:

A fundamental responsibility of the Emergency Medical Technician is to conserve life, to alleviate suffering, to promote health, to do no harm, and to encourage the quality and equal availability of emergency medical care.

The Emergency Medical Technician provides services based on human need, with respect for human dignity, unrestricted by consideration of nationality, race, creed, color or status.

The Emergency Medical Technician does not use professional knowledge and skills in any enterprise detrimental to the public well-being.

The Emergency Medical Technician respects and holds in confidence all information of a confidential nature obtained in the course of professional work unless required by law to divulge such information.

The Emergency Medical Technician, as a citizen, understands and upholds the law and performs the duties of citizenship; as a professional, the Emergency Medical Technician has the never ending responsibility to work with concerned citizens and other health care professionals in promoting a high standard of emergency medical care to all people.

The Emergency Medical Technician shall maintain professional competence and demonstrate concern for the competence of other members of the Emergency Medical Services health care team.

An Emergency Medical Technician assumes responsibility in defining and upholding standards of professional practice and education.

The Emergency Medical Technician assumes responsibility for individual professional actions and judgment, both in dependent and independent emergency functions, and knows and upholds the laws, which affect the practice of the Emergency Medical Technician.

An Emergency Medical Technician has the responsibility to be aware of and participate in matters of legislation affecting the Emergency Medical Service System.

The Emergency Medical Technician, or groups of Emergency Medical Technicians, who advertise professional service, does so in conformity with the dignity of the profession.

The Emergency Medical Technician has an obligation to protect the public by not delegating to a person less qualified, any service which requires the professional competence of an Emergency Medical Technician.

The Emergency Medical Technician will work harmoniously with and sustain confidence with other Emergency Medical Technicians, the nurses, the physicians, and other members of the Emergency Medical Services health care team.

The Emergency Medical Technician refuses to participate in unethical procedures, and assumes the responsibility to expose incompetence or unethical conduct of others to the appropriate authority in a proper and professional manner.

USE OF MIND ALTERING SUBSTANCES

Possession, use or distribution of illicit drugs or alcohol while in class or on campus is prohibited. Refer to the KCC Student Handbook for the Rules of Campus Conduct (i.e. The Henderson Rules.)

CODE OF ETHICS

The Paramedic Program prepares individuals for health care practice. These individuals are held to standards of personal and professional conduct. A mind-altering substance is a medication or beverage that affects one's ability to think clearly, make rational judgments, or solve problems. Our affiliating clinical agencies have strict policies regarding substance use and abuse. Students assigned to an agency for clinical experiences, must comply with its requirements. Therefore, these policies are enforced by the Allied Health Department:

- Students with a medical condition that may mimic signs of confusion, disorientation, or other impaired mental functioning must notify the faculty. For example, hypoglycemia that occurs with diabetes will cause these signs.
- Students taking mind-altering drug by prescriptions must report this information to the Faculty for consultation and guidance. Medications that may impair thinking and reasoning include antihistamines or narcotic analgesics, among others.
- Students suspected of using mind-altering drugs (legal or illegal) or alcohol while on campus, are subject to the College policies.
- Students are subject to the policies of the respective clinical agency, as well as the college, if suspected to be under the influence of mind-altering (legal or illegal) or alcohol while in the clinical agency. Healthcare agencies may require urine and sometimes blood tests of employees/students when substance abuse is suspected. Students will be dismissed immediately and not allowed to return until test results are available.
- Testing positive for illegal drugs or alcohol will result in immediate disciplinary action. Options include mandatory counseling, course failure, or dismissal from the Program.
- Remember that the Faculty are caring, helping professionals who are available for advice and counseling to students using or abusing substances, or if unfairly accused of substance abuse.

PROFESSIONALISM

The concept of professionalism in health care is motivated by the primary goal of providing quality service to the health care consumer. It is also a concept that involves a commitment to the development and maintenance of a level of knowledge, which enables the provider to utilize standards of care in the daily delivery of health care to the consumer. The paramedic/EMS Faculty is dedicated to providing students with the knowledge and background necessary to develop a sense of professionalism, which will extend into their career.

CIVILITY

Kingsborough Community College is committed to the highest standards of academic and ethical integrity, acknowledging that respect for self and others is the foundation of educational excellence. Civility in the classroom and clinical setting as well as respect for the opinions of others is very important in an academic environment. It is likely you may not agree with every topic that is discussed in the classroom. Courteous behavior and responses are expected. Therefore, in this classroom, any acts of harassment and/or discrimination based on matters of race, gender, sexual orientation, religion, and/or ability is not acceptable. Whether we are students, faculty, or staff, we have a right to be in a safe environment, free of disturbance and civil in all aspects of human relations.

Incivility will not be tolerated and can be grounds for termination from the program.

PERSONAL APPEARANCE

Dress Code for Lab Sessions

Students are required to wear program issued uniform shirts or sweatshirts at all times. Uniforms must be clean and in good repair. Students are required to wear uniform/cargo pants or trousers (black or blue) at all times with suitable black work/service shoes providing foot protection. Women may wear skirts (black or blue only). No Jeans, leggings, shorts, denim skirts and/or miniskirts are allowed to be worn in class.

A student who appears in class with non-regulation attire may be sent home at the discretion of the Program Director or CIC. The student will be considered absent without excuse.

Dress Code for Clinical Rotations

Field Internship

Students must wear blue pants, blue collared shirt (Turtlenecks & Polo shirts are acceptable), black shoes. All outer most layers of clothing (jackets, sweatshirts, etc.) must appropriately identify you as an EMT and the Kingsborough community college Paramedic Student. In this regard program patches, which must be affixed to garments, Patches are available at the Kingsborough book store. No jackets with any logos or emblems other than as indicated above are allowed.

OR/Anesthesia and Labor & Delivery

Students must wear program/ hospital issued scrubs/ lab coats.

Emergency Room, Peds ER, Psych ER, Critical Care

Students must wear pants, shirt and tie for men, appropriate attire for women. Shoes, not sneakers are required for all rotations. No jeans, leggings or miniskirts are allowed at any rotations. Program issued lab coats, with the Kingsborough community college Paramedic Program patch affixed to the sleeve is required for all hospital-based rotations.

Students not appropriately attired will be sent home and will receive a negative evaluation for that rotation.

FATIGUE

Fatigue can certainly impair a health care worker's ability to provide safe, professional care. All students need to carefully assess his/her level of fatigue, school requirements in terms of lecture, on-campus labs and clinical experiences and own work schedules. This assessment should carefully consider the potential impact of excessive employment on his/her ability to provide safe, professional care. Each student has an ethical responsibility to ensure that fatigue does not negatively impact student responsibilities

Netiquette

- Be mindful that electronic communication does not convey facial expression or tone of voice. It is important to consider that what is written could be misinterpreted.
- Typing messages all in caps is regarded by most Internet users as shouting; so unless you mean to yell at someone, type your message in standard format.
- It is appropriate to share your point of view as well as indicate disagreements with another's posts- however, it is not appropriate to make negative personal statements about another's posts.
- Since many people read their email on small screen devices, when appropriate, be brief.
- Clearly indicate the nature of your email message in the title of the communication.
- If you send an email from a personal email account, sign the message. Often the names of personal email accounts are different from a person's given name. Use the KCC email whenever possible.

EQUIPMENT ADVISORY AND REQUIREMENTS

Practical Skills Lab

Each student is required to bring the following equipment for all practical skills lab:

- Watch with a second hand
- Penlight
- Stethoscope
- Lab Book
- Skills sheets
- Pen
- Safety Goggles
- Mask/Gowns as required

Clinical Rotations

Each student is required to have the following equipment for all clinical rotations:

- Watch with a second hand
- Penlight
- Stethoscope
- Scissors
- Pen
- Rotation forms and Envelopes
- Skill cards
- School ID and Hospital ID
- BLS Credentials
- Masks/Gowns as required

****Safety Advisory****

- All defibrillators used for training are to be treated as live and capable of discharging. There is NO SUCH THING as a "training mode" in non-automated defibrillators.
- All defibrillators are live and capable of discharging even when working in conjunction with an arrhythmia generating device or computer.
- Unless instructed to do so and under the direct supervision of a lab instructor, students are not to change the joules settings, handle paddles or press buttons on the machine.
- **Shock hazard:** The defibrillator delivers up to 360 joules of electrical energy. Unless properly used as described by your instructor, the electrical energy may cause serious injury or death. Do not attempt to operate this device unless thoroughly familiar with the operating instructions and the function of all controls, indicators, connections, and accessories for the device provided for you in class.
- Do not disassemble the defibrillator. It contains no operator serviceable components and dangerous high voltages may cause injury or death.
- All pharmaceuticals are actual drugs and should be treated as such, Sharps are often in use – Take Precautions
- Students must acknowledge and sign the assumption of risk form at the beginning of the lab session
- REPORT ALL UNSAFE BEHAVIOR TO YOUR INSTRUCTOR IMMEDIATELY

USE OF SKILLS ON ROTATIONS

The paramedic student must demonstrate competency in all advanced level skills prior to performing any skill on a clinical rotation.

- Approval to perform a skill will be based upon demonstrating proficiency in skills evaluations.
- Students will be signed off upon successful demonstration of competence in a skill. The lab coordinator/ CIC will mark the student's skill log in the appropriate area(s).
- All students will perform skills at the discretion of the rotation preceptor. Students are not allowed to undertake any patient care intervention without the expressed permission of the rotation preceptor. Not all skills can be practiced on all rotations at every clinical affiliate.
- Any student performing a skill without the permission of the rotation preceptor, or above the current level of training, will be dismissed from the rotation site and face disciplinary actions and possible dismissal from the program. Under no circumstance should a student perform a skill for which the student has not been approved, regardless if asked to do so by the Affiliate staff. The student is responsible for informing the Affiliate staff of their status on performing any skills. The student is responsible for his/her actions in the clinical setting.

Absolutely no ALS skill may be performed outside of an approved clinical education setting. Students may only practice their skills while on regularly scheduled clinical or field internship rotations.

Students are expected to fully participate in rotations in regards to BLS skills.

Accidents / Injury / Incidents During Clinical Experiences

A student who is injured during a clinical agency experience must be examined and treated in the emergency department and/or by a private physician. Health clearance must be obtained from the Office of Health Services before the student can return to the clinical agency. Relevant incident reports for the agency and Kingsborough, must be completed by the faculty and student.

Students who have any change in their health status during the semester (due to injury, illness, pregnancy/childbirth) are required to submit documentation to the program administration and the college's Office of Health Services. Students are placed on clinical and lab halt due to injury/illness to avoid injury/illness complication until they are cleared by the program director. Clinical and lab absence are excused but sessions must be made up when cleared. Students must submit a RETURN OF EMS DUTIES form signed, dated and stamped by the treating physician to receive clearance from the paramedic program prior to returning to clinical agency experiences and lab session practice.

CLINICAL/FIELD ROTATION GUIDELINES

Clinical education represents the most important component of paramedic education since this is where the student learns to synthesize cognitive and psychomotor skills. The purpose of the clinical education is to integrate and reinforce the didactic and skills laboratory components of the program. Working alongside paramedics in the field allows and encourages students to develop confidence and become competent in emergency procedures.

Students must obtain Health services clearance and back ground check completion before attending any scheduled rotation including required titers and mandated vaccination. Medical clearance acknowledgment form is signed a kept as part of the student file.

Students are required to schedule clinical/Field rotations in advance utilizing the program assigned web-page tracking program adhering to the clinical orientation guidelines explained during program orientation. Students are not permitted to work while they are on clinical/field rotations nor can they count work hours towards required clinical/field hours at any phase of the rotations. In addition, students are not permitted to conduct more than 40 rotation hours at the work place During any phase of the rotation including capstone internship.

Clinical Education Settings

Hospitals

Woodhul Hospital MC

760 Broadway
Brooklyn NY 11206

Maimonides MC

4802 10th Avenue
Brooklyn, NY 11219

Wyckoff Heights MC

337 Stanhope St
Brooklyn NY 11237

Brookdale Hospital MC

1 Brookdale plaza
Brooklyn, NY 11212

FDNY Telemetry

58-65 52nd Road
Woodside, NY

Downstate MC

450 Clarkson Ave
Brooklyn, NY 11203

NYU Hospitals EMS services

Manhattan Campus
Brooklyn campus

Maimonides Ambulance Department

1036 38th Street Brooklyn,
NY

Senior Care EMS Services

Brooklyn hospital
St Barnabas hospital
Beth Israel
Kings Brook Jewish
Interfaith M.C.

Wyckoff Heights EMS

337 Stanhope St
Brooklyn NY 11237

Objectives

The paramedic student will rotate through several clinical areas at different clinical affiliates during the program. The purposes of these rotations are:

1. To provide exposure to the types of injuries and diseases commonly encountered by the paramedic, i.e. cardiovascular disease and trauma, as well as those less commonly encountered situations such as critical pediatrics.

CLINICAL ROTATION GUIDELINES

2. To provide clinical practice of specific psychomotor skills utilized by the paramedic, i.e. IV access, endotracheal intubation, EKG interpretation, medication administration, splinting and bandaging, etc.
3. To provide a controlled environment through which the students will be able to access, and when appropriate, assist in the treatment of patient under the direct supervision of physicians, nurses, technical staff and paramedic preceptors.
4. To provide clinical experience in the pre-hospital phase of care under the direction of paramedic preceptors.
5. To provide educational activities that will clarify emergency medical concepts pertaining to assessment and treatment, i.e. morgue rotation.
6. To foster appreciation of the contribution that pre-hospital interventions can have on the subsequent care and treatment of patients

Students will be required to have a completed Evaluation Form for each rotation. (see Sample Forms) All information must be completed in order to count towards the required clinical competencies (i.e. Call ID, Medical Record Number, etc.). Patient names are not to be used.

Completed evaluation forms must be submitted within 3 days, or by the next class session, (the later of the two), of the date the rotation was completed. Failure to submit forms within 72 hours will result in deleting the rotation.

The foundation of an excellent paramedic educational experience lies in the clinical and hands on experience afforded its students. In this regard an array of superb clinical rotation sites has been arranged for our paramedic students. In order to ensure adequate clinical experience and based on the recommendations of the U.S.D.O.T; not only will students clinical hours be monitored; but skills completed and patient and pathology types encountered as well. In this regard the following guidelines are in effect for all paramedic original courses.

1. There are a total of 572 of ALS hours plus 24-200 BLS hours of clinical rotations needed to complete the paramedic program. Special consideration are giving to 911 providers approved by the program Director.
2. Failure to complete all clinical and field internship assignments by the Final Summative Evaluation date, may lead to the student's failure of the program or delay in their graduation date.
3. No student is to use any advanced skills independent of an instructor until he/she is recognized in writing to be proficient in said skills. The paramedic instructor will indicate skill proficiency by completing the skill proficiency booklet.
4. Not all skills can be practiced in every area. The Paramedic CIC/ clinical coordinator will give the student guidance in this area.
5. While there may be many ways to perform a procedure and perform it correctly, only those variants sanctioned by the program Medical Director, Program Director and/or the Paramedic CIC/ Clinical coordinator will be acceptable.
6. Attendance at all clinical and field internship assignments must be met.
7. No student is to complete more than 16 hours of combined clinical or field rotations within any 24-hour period.
8. In those cases where the student is unable to be present for his shift, the student must request and receive approval to drop or trade that shift.
9. The student should be in the designated area of rotation unless otherwise directed by the Course Lab Instructor Coordinator or Preceptor.

CLINICAL ROTATION GUIDELINES

10. The scheduling process for rotations will be outlined in class. Under no circumstances will a student be credited for a rotation if they are not signed up for the rotation on the appropriate calendar.
11. It is the student's responsibility to bring to the attention of the CIC, clinical coordinator/FISDAP liaison any problems that they encounter with regard to any component of the rotations including difficulty scheduling, etc.
12. For all rotations you should arrive 10 minutes prior to your scheduled start time.
13. Successful completion of any given clinical rotation means that you arrived on time, left on time, spent your time on the clinical unit, participated in care at the appropriate level, and were judged as competent by your preceptor, as evidenced by completion of a rotation evaluation forms including supporting call reports.

Rules and Regulations of the Clinical Facility

All students are responsible for demonstrating a professional attitude towards the clinical facility, its personnel, its patients, and their families. This includes being enthusiastic, mature, motivated to learn and accepting of responsibility.

Though students are not employees of the clinical site, nevertheless, they are subject to all rules and regulations of the clinical facility. The clinical facility rules and regulations will be specified by the clinical faculty, the student is required to become familiar with them and strictly abide by them.

Unexcused tardiness or absence, unavailability, inappropriate behavior, improper conduct or any failure to comply with the clinical facility rules and regulations may result in immediate disciplinary action by the clinical faculty, lab instructor coordinator or the program director.

Student Performance

All students are expected to be responsive and enthusiastic in their performance. They are to follow directions, be attentive to patients, ask questions and participate actively in all learning experiences.

All students are expected to seek out independent learning experiences, as well as those assigned. Students are expected to utilize all clinical time effectively and should be familiar with all objectives prior to the start of each clinical day.

Clinical Objectives

Each student is expected to master all course clinical objectives. Students should expect to be quizzed both verbally and/or in writing relative to the content of this clinical rotation by both the clinical and program faculty. It is the student's responsibility to periodically review these objectives and their success in achieving them with their lab instructor coordinator.

Evaluations

There will be performance evaluations during each clinical rotation. These are designed to evaluate the student's progress to date and provide feedback for improvement. The clinical faculty will directly observe the student in

CLINICAL ROTATION GUIDELINES

the clinical setting and evaluate him/her. An oral or written exam may be part of the performance evaluation. In addition to the evaluations described, the student will also be evaluated on his/her professional conduct and attitudes. This will also be considered in establishing the grade.

The evaluation process is designed to integrate the student's ability to perform professional skills along with their knowledge and attitudes regarding safe, effective and empathetic care and to demonstrate their knowledge of the basic theories and background information presented during the didactic phase of the course. Each student will receive Field Internship & Clinical Rotation Evaluation Forms.

Every rotation requires the completion of an evaluation by a preceptor. A detailed review of the evaluation process is below:

FISDAP Access Code #KCC1219-6CT7.

Kingsborough Community college paramedic program uses a program called FISDAP to schedule, track and evaluate student's clinical rotations. All students must sign up for an account with FISDAP at www.fisdap.com. Students must enter in the required personal information including email address. Once an account has been created, the student will be able to view the rotation schedule for the college students with the help of the Fisdap coordinator. Students will have the ability to schedule for specific rotations based on the skills they have learned and passed to date. For all sites (i.e. Maimonides ER and ambulance and all seniorcare ambulance) students may sign up for rotations until the 25th of the previous month. Rotations may not be scheduled at the last minute. In order to drop or trade a rotation, students need to request and receive approval from the program director through FISDAP.

A Field Internship or Clinical Rotation Evaluation Form must be completed for each scheduled rotation. Students must keep a log book with the following data below to enter into FISDAP within three (3) days of the rotation or prior to the rotation due date for the course. A student will only be allowed to enter in the data for a rotation if they have been previously scheduled according to the policy above. A student who has completed a rotation without scheduling through FISDAP will not receive credit for that rotation.

The following data is required to be entered into FISDAP in order to receive credit for that rotation:

- Preceptor's name
- Mechanism of illness or injury
- Impression of the patient
- Patient's age
- Vital signs
- Attempt of particular skill and success rates
- Individual medication administration, dosages and routes
- Transported or not
- Skills the crew did
- Skills the student participated in or performed
- Total hours the student completed during the rotation shift
- Completed Preceptor Evaluation
- Completed Site Evaluation

In addition to the data entry into FISDAP, students must submit within three (3) business days of the rotation or prior to the rotation due date for the course (the later of the two) in a sealed envelope the Field or Clinical Evaluation form.

If the data entry and/or Field or Clinical Evaluation form has not been completed or submitted by the due date above, the student may not receive credit for their rotation.

Patient Confidentiality

All INFORMATION CONCERNING PATIENTS IS CONFIDENTIAL AND MUST NOT BE DISCUSSED WITH ANYONE WHO IS NOT AUTHORIZED OR DOES NOT REQUIRE THE INFORMATION FOR CARE OF THAT PATIENT. FAILURE TO ADHERE TO THIS REGULATION MAY RESULT IN PROGRAM FAILURE.

CLINICAL ROTATION GUIDELINES

- Patient information should be handled and distributed in a manner that safeguards the confidentiality of the information. It should be remembered that information concerning patients is extremely confidential and should not be released or discussed with anyone, including the patient's family and the press, without the authorization of the Paramedic Program Director or clinical preceptor. Requests for information about patients treated or transported by EMS services should be referred to either the hospital Emergency Department staff or to the EMS service supervisor. Paramedic students should not release information about patients to anyone not directly involved in the care and treatment of the patient.
- You should not discuss matters concerning particular patients in the hallways or in other public areas of the clinical affiliation sites except in extreme emergencies.

Any violation of this policy will be considered extremely serious. The Paramedic Program will take immediate disciplinary action against any student found to have violated this policy, including dismissal from the program. The administration at the clinical affiliates has the right to request disciplinary actions to be taken against any student, or can refuse to allow the student(s) to participate in rotations at their facility, for failure to keep hospital/patient information confidential.

Paramedic students should try to interview patients in as confidential manner as possible consistent with immediate needs and urgencies of the situation. The patient should be given as much privacy as feasible in conducting interviews and physical assessments. In relaying reports to medical providers involved in the further care and treatment of the patient, the pre-hospital care providers should minimize the chances of being overheard, particularly where the information is of a sensitive nature.

For documentation of any type (i.e. for clinical competencies, case presentations, etc.) the patient is to be referred to the hospital record number or CALL ID/ACR number in the case of pre-hospital patients. Patient names are not to be used in any instance.

Clinical Attendance (Field)

The student should be in the designated area of the rotation unless otherwise directed by the CIC, Lab Instructor Coordinator or Preceptor. Successful completion of any given clinical rotation means that you arrived on time, left on time, spent your time on the clinical unit, participated in care at the appropriate level, and were judged as competent by your preceptor, as evidenced by completion of a rotation evaluation.

The attendance process is as follows:

1. Students sign-up for rotations via the internet (FISDAP), the scheduling process is explained in class.
2. Students are expected to be on time for all scheduled rotations. This is especially important for some ambulance rotations as the assigned CSL may be a distance from the ambulance garage and crews will not wait for late students. If the crew is unable to return to pick up the student the student will have to make-up the session at another time. Students will then miss learning opportunities.
3. Students must arrive on time to their assigned unit. Riding on a different unit other than the previously assigned must be approved by the FISDAP liaison/ clinical coordinator.

PRECEPTORS

Selection of Preceptors

Clinical preceptors fall into one of the following categories, Physician, PA, NP, Nurse or Paramedic.

Physician, PA or NP

These preceptors will be those who have been deemed by the Kingsborough community college or its clinical affiliates as clinical instructors, at either the attending or house staff level. The actual selection is done routinely by the hospitals as part of their normal academic reviews. These preceptors will receive an initial orientation from the Clinical Site Contact or Department Head or at a minimum will receive and review a copy of the paramedic program's *Preceptor Handbook*.

Nurse

Nurses who will be used as preceptors are those who meet the following requirements: registered nurse, selected by the Kingsborough community college or its clinical affiliates as a nurse educator, clinical instructor or preceptor. The actual selection is done routinely by the hospitals as part of their normal academic reviews. These preceptors will receive an initial orientation from the Clinical Site Contact or Department Head or at a minimum will receive and review a copy of the paramedic program's *Preceptor Handbook*.

Paramedic

Paramedics used as clinical preceptors will be those who are New York State and New York City REMAC Certified Paramedics, working for a NYS DOH approved ALS Agency. These preceptors will receive an initial orientation from the Clinical Site Contact or Department Head or at a minimum will receive and review a copy of the paramedic program's *Preceptor Handbook*.

Clinical Rotation Preceptor Orientation

The clinical preceptors will be selected as listed above. Prior to the initiation of any new clinical rotation site, the preceptors/supervisors for that site will receive an orientation from the clinical site contact to include the following:

1. Course policies and Procedures
2. Clinical Rotation Objectives
3. Clinical Rotation log
4. Hospital Policies and Procedures
5. Evaluation Tools
6. Skills to be performed at the Particular Site

In addition, copies of the paramedic program *Preceptor Handbook* will be distributed to all preceptors and copies will be provided for future preceptors.

All approved preceptors are allowed to sign clinical forms, however, they don't have the program authorization to dismiss students earlier than their assigned time, as such early dismissal requires the approval of the clinical professor/ program clinical coordinator/ Program staff.

CLINICAL REQUIREMENTS AND COMPETENCIES

Required Clinical Rotation Hours

Rotation	ALS Hours	Start Week for Rotations
Field Experience Phase I	24	Week 3
Field Experience Phase II	144	Week 6
Field Internship	156	Week 29
Adult Emergency Department	136	Week 11
Pediatric Emergency Department	40	Week 35
Critical Care	32	Week 28
Operating Room/Anesthesia	24 (10 ETI)	Week 17
Labor & Delivery	24	Week 34
Psychiatry	16	Week 30
Telemetry	8	Week 20

Field Experience I

BLS skills on an ALS ambulance

Field Experience II

Performance of ALS skills on an ALS ambulance including ALS level of assessment and ALS psychomotor skills

Field Internship

In this final phase, which can only take place in the last quarter of the paramedic program the student will act as Team Leader. The definition of Team Leader is being in control of all aspects of the call including directing the other team members to perform tasks if needed. To be the Team leader the student must have successfully completed all didactic, clinical and field experience requirements prior to the start of their field internship. The student will have also have acquired enough exposure during their field experiences to develop the affective domain of a competent entry-level paramedic. They will apply their experience, their knowledge of disease pathologies and age appropriate assessments to develop an appropriate treatment plan based on patient presentation and diagnostic testing.

Minimum Skill, Pathology and Age Encounter Requirements

As mentioned earlier in order to ensure adequate clinical experience and based on the recommendations of the U.S.D.O.T; not only will student's clinical hours be monitored; but skills completed and patient ages and pathology types encountered, as well. In this regard the following tables outline the minimum competencies and expected totals of skills, procedures, age and pathology encounters that are expected to be completed by each student.

CLINICAL REQUIREMENTS AND COMPETENCIES

In the event a student is unable to fulfill the outlined requirements during the completion of the standard required rotation hours they may be required to complete additional rotation time and/or may be offered alternatives to their completion (ex: mannequin demonstration, scenarios and / or simulations). The decision regarding the need for alternative completion of said requirements or additional rotation hours will be made after a thorough review of the student's academic record by the Program Director and/or CIC and/or Lab Instructor Coordinator in conjunction with the Medical Director, the decision regarding the student's clinical competency, determined after this review, will be final.

Assessment by Age	Required #	Impressions	Required #
Neonate	2	Distressed Neonate	2
Infant (<1y/o)	2	CVA	3
Toddler (1-3 y/o)	2	Cardiac	20
Preschooler (3-6y/o)	2	Cardiac Arrest	1
Grade Schooler (6-12y/o)	2	Other Medical condition	30
Adolescent (>12y/o)	2	Neuro	3
Peds (Any Age)	36	OB	10
Adult	60	Psych	10
Geriatric	36	Respiratory	20
		Trauma	30
		Abdominal Pain	24
		Change in Responsiveness	12
		Cardiac Pathology/ Chest Pain	20
		Cardiac Dysrhythmia	6
		Weakness	3
		Medical Neurologic Pathology/ AMS	10

Skill	Required #	Skill	Required #
Vital Signs	50		
Physical exam	50	IV Bolus Medication	12
Patient Interview	50	IV infusion/ Piggy Bag	10
Endotracheal Suctioning	2	Endo trach-Intubation	10
BVM ventilation	10	FBAO Removal with Magil Forcep	2
Cardioversion	4	IM Med Administration	5
External Pacing	4	Needle Cricothyrotomy	2
IV Access - Adult	50	Manual Defib	2
IV Access – Peds	1	Chest Compression	2
IO Access – Adult or Peds	4	Pleural Decompression	4
Supraglottic Airway	10		
Team Leader	50		
ALS	25		

FIELD EXPERIENCE/INTERNSHIP

Introduction

The Paramedic Program is an intensive course in which experienced Emergency Medical Technicians receive instruction in advanced life support to be applied in the pre-hospital setting as Paramedics. The program includes extensive instruction in Anatomy and Physiology; advanced airway, pathophysiology of diseases of the cardiovascular, respiratory and neurological systems as well as pharmacology, fluids and shock, trauma, medical emergencies, obstetrical complications and pediatric emergencies commonly encountered in the pre-hospital setting. In conjunction with the didactic portion of the course, students also complete clinical rotations through the Medical Examiner/Morgue (when available), OR/Anesthesia Service, Adult, Pediatric and Psychiatric Emergency Departments, Labor and Delivery, Critical Care Units and Advanced Life Support Ambulance rotations.

During Field internship required 156 hours, student may only do 40 hours at their work place

Overall Goals

To provide an environment in which the student can learn to integrate the skills and knowledge obtained during the course to the pre-hospital environment. Students will participate with the preceptors in the basic and advanced life support care of patients.

Field Experience Phase I: Students will primarily observe ALS procedures; but may assist in BLS care.

Field Experience Phase II: Students will perform all ALS skills (approved by CIC or LIC for a student to perform) under preceptor direction.

Field Internship: Students will continue to execute ALS skills; however, they will also assume the role of "Team Leader" under direct preceptor supervision.

Length of ALS Rotation

Experience Phase I - 24 hours is required

Experience Phase II - 200 hours is required

Internship - 150 hours is required

Overnight shifts will be permitted at the discretion of the program director

Preceptors

The clinical preceptors are NYS and NYC REMAC Certified paramedics assigned to the ambulance for that shift.

Student Responsibilities

The student will arrive at the respective ambulance department in the assigned uniform. The student will display his or her paramedic student identification card on the outermost garment. Upon arriving at the site, the student will seek out the ambulance supervisor.

Objectives

Experience Phase I

The paramedic student will participate in daily ambulance check out

FIELD EXPERIENCE/INTERNSHIP

the paramedic within the parameters of his or her clinical qualifications by assisting the paramedic in delivery of Basic Life Support.

Observe the paramedic during delivery of Advanced Life Support.

Experience Phase II

All objectives listed for phase I, and Assist the paramedic in performance of Advanced Life Support Skills.

Internship

All objectives listed for phase I & II, and Act as Team Leader on emergency calls.

When requested, and under the direct supervision of the clinical preceptor, assist the staff with the following interventions: (Phase II Only)

The paramedic student will produce his skill proficiency log to identify what skills the student may be allowed to perform, having successfully passed the classroom or clinical criteria of the program. Should a discrepancy arise, or in the event that the student cannot produce this form, the preceptor will contact the program director or the director of EMS for clarification.

- CPR
- Application of ECG Monitor
- Recording and interpretation of ECG rhythms
- Recording and interpretation of 12-Lead EKG
- Defibrillation
- Cardioversion
- External Cardiac Pacing
- Assessment and recording of Vital Signs
- Patient movement and spinal immobilization
- Hemorrhage control and bandaging
- Venous blood sampling/Phlebotomy
- Intravenous access
- Intraosseous access
- Preparation and administration of IV, IM, ET, SQ, PO, SL, IN, IO, Rectal and Inhalation medications
- Oxygen administration
- Positive pressure ventilation
- Oropharyngeal and endotracheal suctioning
- Endotracheal intubation
- Needle Decompression
- Needle Cricothyrotomy
- Patient presentation to medical control, hospital triage, and/or the receiving physician
- Supraglottic Airway

In addition to Fisdap data entry, students are mandated to submit a well-documented ACR/PCR for every Patient they encounter during their field ride along. Written documentation is an essential part of shift completion. Failure to submit field experience preceptor form accompanied by written ACR/PCR for each patient documented within the allotted time (72 hours) will result in deleting related entry.

ADULT EMERGENCY DEPARTMENT

Introduction

The Paramedic Program is an intensive course in which experienced Emergency Medical Technicians receive instruction in advanced life support to be applied in the pre-hospital setting as Paramedics. The program includes extensive instruction in Anatomy and Physiology; advanced airway, pathophysiology of diseases of the cardiovascular, respiratory and neurological systems as well as pharmacology, fluids and shock, trauma, medical emergencies, obstetrical complications and pediatric emergencies commonly encountered in the pre-hospital setting. In conjunction with the didactic portion of the course, students also complete clinical rotations through the Medical Examiner/Morgue, OR/Anesthesia Service, Adult, Pediatric and Psychiatric Emergency Departments, Labor and Delivery, Critical Care Units and Advanced Life Support Ambulance rotations.

Overall Goals

To provide a controlled environment in which the student is exposed to patients presenting with acute illness and injuries. Through observation of and participation in the definitive care of these patients, the student will become better able to identify, assess and understand the pathophysiology of diseases. To provide clinical practice, under the direct supervision of an approved preceptor, of psychomotor skills as outlined below. To integrate educational concepts taught in the Paramedic Program with actual application of treatment modalities, which will further enhance the student's understanding of the progression of care from the pre-hospital setting into the hospital.

Length of Rotation

A minimum of 136 hours is required.

Preceptors

An ER Physician, Physician Assistant or Nurse will serve as the preceptor and will be responsible for direct supervision of the student's activities. The preceptor will be assigned no more than two students.

Student Responsibilities

The paramedic student will arrive at the Adult Emergency Department in appropriate business attire and short lab jacket. The student will display his paramedic student identification card on the lab jacket. Upon arriving at the Emergency Department, the student will seek out the senior Emergency Medicine Resident, Attending Physician or nursing supervisor on duty.

Objectives

The paramedic student will:

- Assist the physician and nursing staffs within the parameters of his clinical qualifications.
- Participate in patient rounds.
- Utilize the physician and nursing staffs as educational resources.
- Perform patient assessment, including development of a relevant medical history and performance of physical examinations, which will include, at minimum, measuring and recording vital signs, auscultation of lung and heart sounds, observation of the patient's general condition and palpation of the abdomen and extremities.
- Interact with Specialty services such as the Trauma Team, Burn Team, Orthopedics, etc.
- Follow up specific patients for discussion in a classroom session.

ADULT EMERGENCY DEPARTMENT

The paramedic student will be able to perform the following skills based on their documented skills training:

The paramedic student will produce his skill proficiency log to identify what skills the student may be allowed to perform, having successfully passed the classroom or clinical criteria of the program. Should a discrepancy arise, or in the event that the student cannot produce this form, the preceptor will contact the Instructor/Coordinator or Lab Instructor Coordinator for clarification.

- CPR
- Application of ECG Monitor
- Recording and interpretation of ECG rhythms
- Recording and interpretation of 12-Lead EKG
- Defibrillation
- Cardioversion
- External Cardiac Pacing
- Assessment and recording of Vital Signs
- Patient movement and spinal immobilization
- Hemorrhage control and bandaging
- Venous blood sampling/Phlebotomy/Point of Care Testing
- Preparation and administration of IV, IM, ET, SQ, PO, SL, IN, IO and Inhalation medications
- Oxygen administration
- Positive pressure ventilation
- Oropharyngeal and endotracheal suctioning
- Endotracheal intubation
- Needle Decompression
- Needle Cricothyrotomy
- Supraglottic Airway
- Orogastric tube or Nasogastric tube placement

Guidelines

Students are **NOT** to draw blood tubes for type & screen testing; this tube may only be drawn by a nurse or physician. All blood tubes drawn must have the patient's name clearly labeled on them.

The following is a list of medications that paramedic students are allowed to administer in the Emergency Department.

Ultimate discretion in determining whether a student may administer any of the APPROVED medications lies with the preceptor and is contingent upon the particular clinical circumstance.

At no time are paramedic students to handle or administer controlled substances while in the ED unless supervised, license number is required for documentation.

All medications are administered under preceptor direction.

Approved Medications:

Albuterol	Furosemide	Zofran
ASA	Glucagon	
Benadryl	Oxygen	
Dextrose	NTG Tabs/Paste/Spray	
Decadron	Solu Medrol	

ADULT EMERGENCY DEPARTMENT

The following Medications may only be administered under DIRECT physician supervision. Paramedic students may only administer these medications via the IV BOLUS route, students MAY NOT prepare or administer these medications via the IV Piggyback/Drip route.

Adenosine
Amiodarone
Atropine
Diltiazem
Epinephrine
Lidocaine
Vasopressin
Verapuan
Verapmil
Zofran

Introduction

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Overall Goals

To provide a controlled environment in which the student can learn to recognize signs and symptoms of normal and abnormal labor and birth. To learn to effectively communicate with and develop sensitivity to the woman in labor. To gain experience in conducting patient obstetrical and gynecological histories. To observe patients through the labor process to birth. To observe surgical and abnormal deliveries. To better understand the principles of newborn management techniques and post-partum care. To understand the roles and responsibilities of the nursing and physician staffs in the Labor and Delivery suite.

Length of Rotation

A minimum of 24 hours is required.

Preceptors

The clinical preceptor is a physician, physician assistant, nurse practitioner or nurse in the assigned area who is responsible for assignment of clinical tasks for the students while providing direct supervision and evaluation the student's performance.

Student Responsibilities

The student will arrive at the Labor and Delivery Suite in appropriate scrubs and short lab jacket. The student will display his paramedic student identification card on the lab jacket. Upon arriving at the Labor and Delivery Suite, the student will seek out the nursing supervisor.

Objectives

The paramedic student will:

- Assist the physician and nursing staffs within the parameters of his or her clinical qualifications.
- Participate in patient rounds.
- Utilize the physician and nursing staffs as educational resources.
- When feasible, conduct patient interviews to develop pertinent maternal history.
- Observe and when possible assist patients in labor and through the birthing process.
- Observe fetal monitoring techniques and understand the significance of fetal distress during the labor and birth process.
- Observe and assist with post-partum management of patients.

LABOR AND DELIVERY

- Observe and assist with assessment and management of the newborn including suctioning, APGAR scoring and resuscitation as needed.

When requested, and under the direct supervision of the clinical preceptor, assist the staff with the following interventions:

The paramedic student will produce his skill proficiency log to identify what skills the student may be allowed to perform, having successfully passed the classroom or clinical criteria of the program. Should a discrepancy arise, or in the event that the student cannot produce this form, the preceptor will contact the Instructor/Coordinator or Lab Instructor Coordinator for clarification.

- Assist with uncomplicated newborn delivery
- CPR
- Application of ECG Monitor
- Recording and interpretation of ECG rhythms
- Assessment and recording of Vital Signs
- Venous blood sampling/Phlebotomy
- Preparation and administration of IV, IO, ET, SQ, PO, SL, IN and Inhalation medications
- Oxygen administration
- Positive pressure ventilation
- Oropharyngeal and endotracheal suctioning
- Endotracheal intubation
- Supraglottic Airway

Introduction

The Paramedic Program is an intensive course in which experienced Emergency Medical Technicians receive instruction in advanced life support to be applied in the pre-hospital setting as Paramedics. The program includes extensive instruction in Anatomy and Physiology; advanced airway, pathophysiology of diseases of the cardiovascular, respiratory and neurological systems as well as pharmacology, fluids and shock, trauma, medical emergencies, obstetrical complications and pediatric emergencies commonly encountered in the pre-hospital setting. In conjunction with the didactic portion of the course, students also complete clinical rotations through the Medical Examiner/Morgue, OR/Anesthesia Service, Adult, Pediatric and Psychiatric Emergency Departments, Labor and Delivery, Critical Care Units and Advanced Life Support Ambulance rotations.

Overall Goals

To provide an opportunity for the student to develop an effective approach to the pediatric patient. To appreciate how the developmental differences of children influence assessment considerations and techniques. To develop an appreciation for the child's physiologic response to illness and injury as it differs from the adult. Applying these principles, the student should recognize the progression of respiratory distress, respiratory failure and shock and their correct treatment.

Length of Rotations

A minimum of 40 hours is required.

Preceptors

The clinical preceptor is a physician, physician assistant, nurse practitioner or nurse in the assigned area who is responsible for the assignment of clinical tasks for the students; while providing direct supervision and evaluation of the student's performance.

Student Responsibilities

The paramedic student will arrive at the Pediatric Emergency Department in appropriate business attire and short lab jacket. The student will display his paramedic student identification card on the lab jacket. Upon arriving at the Pediatric Emergency Department, the student will seek out the physician or charge nurse on duty.

Objectives

The paramedic student will:

- Assist the physician and nursing staffs within the parameters of his clinical qualifications.
- Participate in patient rounds.
- Utilize the physician and nursing staffs as educational resources.
- Perform patient assessment, including development of a relevant medical history and performance of physical examinations, which will include, at a minimum, measuring and recording vital signs, auscultation of lung and heart sounds, observation of the patient's general condition and palpation of the abdomen and extremities.
- Interact with Specialty services such as the Trauma Team, Burn Team, Orthopedics, etc.
- Follow up specific patients for discussion in a classroom session.

PEDIATRIC EMERGENCY DEPARTMENT

When requested, and under the direct supervision of the clinical preceptor, assist the staff with the following interventions:

The paramedic student will produce his skill proficiency log to identify what skills the student may be allowed to perform, having successfully passed the classroom or clinical criteria of the program. Should a discrepancy arise, or in the event that the student cannot produce this form, the preceptor will contact the Instructor/Coordinator or Lab Instructor Coordinator for clarification.

- CPR
- Application of ECG Monitor
- Recording and interpretation of ECG rhythms
- Recording and interpretation of 12-Lead EKG
- Defibrillation
- Cardioversion
- External Cardiac Pacing
- Assessment and recording of Vital Signs
- Patient movement and spinal immobilization
- Hemorrhage control and bandaging
- Venous blood sampling/Phlebotomy
- Intravenous Access
- Preparation and administration of IV, IO, IM, ET, SQ, PO, SL, IN, Rectal and Inhalation medications
- Oxygen administration
- Positive pressure ventilation
- Oropharyngeal and endotracheal suctioning
- Endotracheal intubation
- Intraosseous access
- Orogastric tube or nasogastric tube placement.

Introduction

The Paramedic Program is an intensive course in which experienced Emergency Medical Technicians receive instruction in advanced life support to be applied in the pre-hospital setting as Paramedics. The program includes extensive instruction in Anatomy and Physiology; advanced airway, pathophysiology of diseases of the cardiovascular, respiratory and neurological systems as well as pharmacology, fluids and shock, trauma, medical emergencies, obstetrical complications and pediatric emergencies commonly encountered in the pre-hospital setting. In conjunction with the didactic portion of the course, students also complete clinical rotations through the Medical Examiner/Morgue, OR/Anesthesia Service, Adult, Pediatric and Psychiatric Emergency Departments, Labor and Delivery, Critical Care Units and Advanced Life Support Ambulance rotations.

Overall Goals

Rotation through Critical Care Units are designed to give our students insight into the definitive treatment of patients similar to those they will be encountering as critical care providers in the pre-hospital setting.

The Critical Care Unit rotations are designed to provide the paramedic student with a sound understanding of acute care and management of patients suffering from severe disease entities and to provide an opportunity to learn at a level beyond the parameters of pre-hospital intervention.

Length of Rotation

A minimum of 32 hours is required.

Preceptors:

The clinical preceptor is a physician, physician assistant, nurse practitioner or nurse in the assigned area who is responsible to assignment of clinical tasks for the students while providing direct supervision and evaluation of the student's performance.

Student Responsibilities:

The paramedic student will arrive at the Critical Care Unit in appropriate business attire and short lab jacket. The student will display his paramedic student identification card on the lab jacket. Upon arriving at the Critical Care Unit, the student will seek out the physician or charge nurse on duty.

Objectives

The paramedic student will:

- Assist the physician and nursing staffs within the parameters of his clinical qualifications.
- Participate in patient rounds.
- Perform patient assessments including development of pertinent medical history and performance of physical examinations which will include, at a minimum, cardiopulmonary examination including auscultation of heart and lung sounds, recording of vital signs and additional pertinent examinations as directed by the clinical preceptor.
- Review the charts of patients with particular emphasis on history, physical findings, laboratory results and treatment modalities.

CRITICAL CARE/TRAUMA

When requested, and under the direct supervision of the clinical preceptor, assist the staff with the following interventions:

The paramedic student will produce his skill proficiency log to identify what skills the student may be allowed to perform, having successfully passed the classroom or clinical criteria of the program. Should a discrepancy arise, or in the event that the student cannot produce this form, the preceptor will contact the Instructor/Coordinator or Lab Instructor Coordinator for clarification.

- CPR
- Application of ECG Monitor
- Recording and interpretation of ECG rhythms
- Recording and interpretation of 12-Lead EKG
- Defibrillation, Cardioversion, External Cardiac Pacing
- Assessment and recording of Vital Signs
- Venous blood sampling/Phlebotomy
- Intravenous access
- Preparation and administration of IV, IM, ET, SQ, PO, SL, IN and Inhalation medications
- Oxygen administration
- Positive pressure ventilation
- Oropharyngeal and endotracheal suctioning
- Endotracheal intubation

Introduction

The Paramedic Program is an intensive course in which experienced Emergency Medical Technicians receive instruction in advanced life support to be applied in the pre-hospital setting as Paramedics. The program includes extensive instruction in Anatomy and Physiology; advanced airway, pathophysiology of diseases of the cardiovascular, respiratory and neurological systems as well as pharmacology, fluids and shock, trauma, medical emergencies, obstetrical complications and pediatric emergencies commonly encountered in the pre-hospital setting. In conjunction with the didactic portion of the course, students also complete clinical rotations through the Medical Examiner/Morgue, OR/Anesthesia Service, Adult, Pediatric and Psychiatric Emergency Departments, Labor and Delivery, Critical Care Units and Advanced Life Support Ambulance rotations.

Overall Goals

To provide an opportunity for the student to develop an effective approach to the psychiatric patient. To appreciate how psychiatric conditions can influence assessment considerations and techniques. To develop an appreciation for the special needs of the psychiatric patient.

Length of Rotations

A minimum of 16 hours is required.

Preceptors

The clinical preceptor is a physician, physician assistant, nurse practitioner or nurse in the assigned area who is responsible for the assignment of clinical tasks for the students, while providing direct supervision and evaluation of the student's performance.

Student Responsibilities

The paramedic student will arrive at the Psychiatric Emergency Department in appropriate business attire and short lab jacket. The student will display his paramedic student identification card on the lab jacket. Upon arriving at the Psychiatric Emergency Department, the student will seek out the physician or charge nurse on duty.

Objectives

The paramedic student will:

- Assist the physician and nursing staffs within the parameters of his clinical qualifications.
- Participate in patient rounds.
- Utilize the physician and nursing staffs as educational resources.
- Observe the performance of psychiatric evaluations.
- Observe the performance of patient assessments, including development of a relevant medical history and performance of a physical examination, which will include, at a minimum, measuring and recording vital signs, auscultation of lung and heart sounds, observation of the patient's general condition and palpation of the abdomen and extremities.

When requested, and under the direct supervision of the clinical preceptor, assist the staff with the following interventions:

The paramedic student will produce his skill proficiency log to identify what skills the student may be allowed to

PSYCHIATRY

perform, having successfully passed the classroom or clinical criteria of the program. Should a discrepancy arise, or in the event that the student cannot produce this form, the preceptor will contact the Instructor/Coordinator or Lab Instructor Coordinator for clarification.

- Assessment and recording of Vital Signs
- Venous blood sampling/Phlebotomy
- Intravenous access
- Preparation and administration of IV, IO, IM, ET, SQ, PO, SL, IN and Inhalation medications

Introduction

The Paramedic Program is an intensive course in which experienced Emergency Medical Technicians receive instruction in advanced life support to be applied in the pre-hospital setting as Paramedics. The program includes extensive instruction in Anatomy and Physiology; advanced airway, pathophysiology of diseases of the cardiovascular, respiratory and neurological systems as well as pharmacology, fluids and shock, trauma, medical emergencies, obstetrical complications and pediatric emergencies commonly encountered in the pre-hospital setting. In conjunction with the didactic portion of the course, students also complete clinical rotations through the Medical Examiner/Morgue, OR/Anesthesia Service, Adult, Pediatric and Psychiatric Emergency Departments, Labor and Delivery, Critical Care Units and Advanced Life Support Ambulance rotations.

Overall Goals

To provide a controlled environment in which the student can practice endotracheal intubation. To better understand the principles of intubation and the management of the mechanically ventilated patient.

Length of Rotation

A minimum of 24 hours are required. A minimum of 5 successful endotracheal intubations must be performed. Students who have completed the required twenty-four hours of rotations but have not achieved the 5 intubations required will be required to do an additional 8 hours to achieve their minimum 5 successful intubation. If a student is still deficient in the 5 intubations, they will be required to complete additional Anesthesia rotation time, until they have achieved the required 5 intubations.

Preceptors

The clinical preceptor is a physician in the assigned area who is responsible for assignment of clinical tasks for the students while providing direct supervision and evaluation of the student's performance.

Student Responsibilities

The student will arrive at the Operating Room Suite in appropriate scrubs. The student will display his paramedic student identification card on his scrub shirt. Upon arriving at the Operating Room Suite, the student will seek out the nursing supervisor.

Objectives

The paramedic student will:

- Assist the physician and nursing staffs within the parameters of his clinical qualifications.
- Utilize the physician and nursing staffs as educational resources.
- Perform endotracheal intubation under direct preceptor supervision.

When requested, and under the direct supervision of the clinical preceptor, assist the staff with the following interventions:

The paramedic student will produce his skill proficiency log to identify what skills the student may be allowed to perform, having successfully passed the classroom or clinical criteria of the program. Should a discrepancy arise, or in the event that the student cannot produce this form, the preceptor will contact the Instructor/Coordinator or

OR/ANESTHESIA

Lab Instructor Coordinator for clarification.

- Endotracheal intubation
- Assessment and recording of Vital Signs
- Venous blood sampling/Phlebotomy
- Intravenous access
- Preparation and administration of IV, IO, IM, ET, SQ, PO, SL, IN and Inhalation medications
- Oropharyngeal and endotracheal suctioning
- Supraglottic Airway
- Intraosseous access

FDNY TELEMETRY (when available)

Introduction

The Paramedic Program is an intensive course in which experienced Emergency Medical Technicians receive instruction in advanced life support to be applied in the pre-hospital setting as Paramedics. The program includes extensive instruction in Anatomy and Physiology; advanced airway, pathophysiology of diseases of the cardiovascular, respiratory and neurological systems as well as pharmacology, fluids and shock, trauma, medical emergencies, obstetrical complications and pediatric emergencies commonly encountered in the pre-hospital setting. In conjunction with the didactic portion of the course, students also complete clinical rotations through the Medical Examiner/Morgue, OR/Anesthesia Service, Adult, Pediatric and Psychiatric Emergency Departments, Labor and Delivery, Critical Care Units, ED Teaching Rounds, FDNY Telemetry and Advanced Life Support Ambulance rotations.

Overall Goals/Objectives

To provide an opportunity for students to interact with an On-Line Medical Control physician as well as understand the importance of patient assessment, patient presentation without seeing an actual patient and review of NYC Paramedic Protocols.

Length of Rotation

A minimum of 8 hours is required.

Preceptors

Students will go to FDNY Telemetry Unit located in Woodside, Queens.

Evaluation

The Online Medical Telemetry physician will confirm the student's attendance, medical knowledge and NYC REMAC protocols.

Guidelines

FDNY Online Medical Control is available only on weekends, 8:00-16:00 and 16:00-0000. You must show up in the school uniform and have the Kingsborough community college visible at all times.

Remember your conduct at the rotation may mean the difference between our students continuing their rotations there or losing our privileges.

Graduation Requirements

Students Must Meet All The Following Requirements:

1. Have met all academic requirements including final summative evaluation with grade of C (75%) or better.
2. Receive certification in BCLS, ACLS, PALS, PHTLS, IS-0005A (NYS Requirement) or a HAZWOPER First Responder Awareness Level Course (National Registry Requirement), IS-100B, IS-200B, IS-700A and IS-800B
3. Have met all clinical requirements and attained all required competencies
4. Have met all financial requirements
5. Have returned their hospital swipe card, ID, IPAD/Laptop Computers, etc.

Students who have successfully completed the entire course of study and met all financial obligations in a timely manner (national registry and state deadline for registration) the EMS - Paramedic Program will be eligible for graduation and the subsequent:

1. National Registry Skill Exam
2. NYS DOH EMS PSE and Written Exam
3. National Registry Computerized Exam
4. NYC REMAC Certification Exam

Advanced standing/ Placement

Candidate Eligibility Requirements

Each candidate must meet the eligibility requirements as set forth in Title 10 NYCRR Part 800.6 as well as for the course in which they are enrolled. Candidates seeking advanced EMS certification (AEMT, EMT-CC or EMT-P), must have a NYS EMT certification that remains valid throughout the entire training program. Further, to be eligible for advanced standing in an EMS certification course, the candidate must have current certification or license in New York State, in one of the professions listed below: • Certified First Responder • Emergency Medical Technician • Advanced EMT • EMT-Critical Care • Registered Nurse • Nurse Midwife • Nurse Anesthetist • Nurse Practitioner • Physician Assistant • Physician.

Kingsborough paramedic program director, the program Medical Director and the program CIC must evaluate a candidate's prior experience and education with the understanding of the specific course objectives for each certification level. While some candidates may be competent in a particular objective, others may need review or may not have covered the objective at all in their original course. Even a professional license does not guarantee a candidate's competency in all of the specific objectives of an EMS certification course. The candidate's cognitive knowledge, psychomotor skills and clinical proficiency must be assessed. The level of proficiency required to "waive" session attendance or to modify the class schedule must be equal to or greater than the entry-level proficiency of a graduate from the course.

Any candidate seeking advanced standing must be registered in an EMS original certification course

The course Medical Director may grant advanced standing for some or all of the objectives of the hospital clinical and Field Internship for a candidate who can document prior hospital or prehospital care experience relevant to specific objectives. The candidate must also demonstrate the ability to serve as a team leader in a variety of prehospital emergency situations. These requirements should not be more, or less than those required of all other students, as approved by BEMS in the course sponsor's policies and procedures.

Once the decision is made by the course Medical Director to grant approval for advanced standing, the candidate and CIC must sign a written agreement outlining the candidate's course requirements

Once a candidate has successfully completed all course requirements to the satisfaction of the course Medical Director, he/she is eligible to take the state certifying practical skills and written examinations.

APPENDIX

Program Assessment

Didactic:

The didactic component of the Paramedic Program consists of lectures and other learning activities designed to enhance your understanding and rationale of the many prehospital decisions, treatments, and skills you will need to be a successful paramedic. These lectures and activities will also provide you opportunities to ask questions to gain deeper understanding and clarify concepts, as well as allow you to collaborate with classmates on case studies and other material. These will all assist you in greater retention of vital material.

Attendance at all lectures or proof of completed subject matter are mandatory as per New York State guidelines. Missed lectures must be made up. This is usually accomplished with a written assignment that must be retained in the student file for State review and audit.

Students will receive an electronic copy of the lecture syllabus for each of the four semesters prior to the start of that semester. This will outline details of lecture requirements, including in-person and online lessons, reading assignments, testing dates and topics, and more. Be sure to read syllabi carefully prior to each semester. This will also include a breakdown of how your didactic grade is calculated for each semester. The only retest that is permitted is one retest of the Program summative Final Exam.

Due to the intensive nature of the program, attendance is essential for you to be successful in the program. The schedule of sessions does include some off-campus activities which are also mandatory.

- You are to **sign in and sign out** for every class session on the Attendance Sheet, which is the official record of your attendance. Failure to sign the Attendance Sheet will result in you being marked absent for the session. If you are not in the classroom when the class begins, even if you have already signed in for the session, you will be marked late by the CIC and/or Skills Coordinator after the scheduled start time of class.
- If you are more than 30 minutes late or leave more than 30 minutes early, you will be marked absent.
- **You must sign in only for yourself. If you sign in for another student(s), you will face disciplinary actions.**
- If you are unable to attend class or will be late to class, you are required to contact the CIC prior to the start of the class or by calling the Paramedic Program Office 718-368-6720.
- The instructor will record all instances of absences, late arrivals and early departures on the area provided on the Attendance Sheet. Breaks will be provided to you during the class sessions. You are expected to return on time and be ready to continue. If you return late from break, you will have a lateness counted against you. **Every four (4) late arrivals or early departures, whether at the start of class, returning from break, or leaving class early, will result in your receiving a warning notice as well as one (1) absence. Four more lateness (total of eight) will require a conference with the CIC. Four more late arrivals (total of 12) will require a conference with the Program Director. Any further lateness will result in Attendance Probation and a conference with the program Director. Any more than twelve (12) late arrivals may constitute your dismissal from the program.**

- You are responsible for getting any and all missed material due to lateness, absences or other reasons including class notes, handouts and make-up assignments for all sessions missed.
- You must request permission to be excused by the CIC if you need to leave early. In a documented emergency, when permission from the CIC has been requested, you may not be marked absent. The CIC may request written verification of the emergency. If you leave before the end of class without prior permission from the CIC, you will be marked absent for that session. No one will be permitted to arrive late or leave early on a regular basis.

COGNITIVE EVALUATION

Didactic evaluation will consist of quizzes, exams, cumulative exams, midterm and final course exam in addition to the program summative final evaluation. The written evaluation may contain a variety of question types including multiple choice, true/false, matching, situational, short answer, etc. You will be made aware of the sections/chapters being covered for each examination. The course schedule generally lists the chapters covered for each exam. Any exams may contain information previously covered in the course for review purposes.

***** NOTE: Any material covered prior to the date of the quiz or exam may be included on the test. This includes both basic EMT skills and knowledge as well as advanced skills and knowledge.**

Material covered on exams is derived from:

- Reading assignments and homework
- Lecture presentations
- Handouts
- Practical Skills Sheets
- Skills presentations
- Student Manuals
- Any other material covered in the course

There will be a minimum of 15 quizzes, 15 exams (cumulative, midterm and semester finals), and the Program summative Final Exam given at the end of the program. Anticipated testing dates are noted on the course schedule. The Program reserves the right to change dates as needed. Furthermore, the CIC may give additional unscheduled quizzes or exams when he/she CIC feels it is in the students' best interest to do so.

Additional testing materials will include weekly quizzes, along with numerous NYS and NYC protocol quizzes.

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Affective evaluations will be conducted twice (end of Fall and end of Spring) throughout the program in these areas of professional behavior:

Integrity

Examples of professional behavior include but are not limited to: consistent honesty, being able to be trusted with the property of others, can be trusted with confidential information, complete and accurate documentation of patient care and learning activities.

Empathy

Examples of professional behavior include but are not limited to: showing compassion for others; responding appropriately to the emotional response of patients and family members; demonstrating respect for others; demonstrating a calm, compassionate and helpful demeanor toward those in need; being support and reassuring to others.

Self-motivation

Examples of professional behavior include but are not limited to: taking initiative to complete assignments; taking initiative to improve and/or correct behavior; taking on and following through on tasks without constant supervision; showing enthusiasm for learning and improvement; consistently striving for excellence in all aspects of patient care and professional activities; accepting constructive feedback in a positive manner; and taking advantage of learning opportunities.

Appearance and Personal Hygiene

Examples of professional behavior include but are not limited to: clothing and uniform is appropriate, neat, clean and well maintained; good personal hygiene and personal grooming.

Self-confidence

Examples of professional behavior include but are not limited to: Demonstrating the ability to trust personal judgment, demonstrating an awareness of your strengths and limitations, exercising good personal judgment.

Communications

Examples of professional behavior include, but are not limited to: speaking clearly; writing legibly; listening actively; adjusting communication strategies to various situations.

Time Management

Examples of professional behavior include, but are not limited to: consistent punctuality, completing tasks and assignments on time.

Teamwork and Diplomacy

Examples of professional behavior include but are not limited to: placing the success of the team above self-interest; not undermining the team; helping and supporting others; showing respect for all team members; remaining flexible and open to change; communicating with others to resolve problems.

Respect

Examples of professional behavior include but are not limited to being polite to others, not using derogatory or demeaning terms, behaving in a manner that brings credit to the profession.

Patient Advocacy

Examples of professional behavior include but are not limited to: not allowing personal bias or feelings to interfere with patient care; placing the needs of patients above self-interest; protecting and respecting patient confidentiality and dignity.

Careful Delivery of Service

Examples of professional behavior include but are not limited to: mastering and refreshing skills; performing complete equipment checks; demonstrating careful and safe ambulance operations; following policies, procedures and protocols; following orders.

Areas in need of improvement will be discussed with you in counseling sessions. Documentation will include the areas in need of improvement as well as corrective actions that need to be taken. Continued problems in this area may lead to your dismissal from the program.