Letter of Intent

EMT Paramedic Program

AAS in Emergency Medical Service

Office of the Provost

and

Department of Nursing
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1. **Purposes and Goals**

   A. **Educational Goals**

   The goal of the A.A.S. in EMT-Paramedic is:

   1. to prepare EMT-Paramedics who are highly competent in the knowledge, skills and demeanor which meet national, State and regional standards for EMT-Paramedic professionals.

   2. to provide a quality general education that facilitates personal development, global citizenship and a foundation for success in further higher education.

   The National Emergency Medical Services (NEMS) is an agency of the National Highway Traffic Safety Administration, which itself is an agency of the United States Department of Transportation. NEMS issues the official US DOT National Standard Curriculum for Emergency Medical Technician-Paramedics (EMT-P). Kingsborough’s program will reflect this standard curriculum.

   The Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions is part of the Commission on the Accreditation of Allied Health Programs (CAAHEP). This Committee sets standards for program accreditation. Kingsborough’s program will meet these standards.

   The New York State Department of Health sets standards for approved programs. New York City’s regional body, REMSCO, also approves training sites according to its standards. Kingsborough’s program will be approved by these entities.

   All four standard curricula are substantially the same and Kingsborough’s A.A.S. in EMT-Paramedic will meet all four, as well as receive national accreditation, NY Department of Health and REMSCO approval for the program.

   Kingsborough’s curriculum will also provide instruction for additional paramedic credentials which are beyond the minimum curriculum essential for program accreditation and approval: Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS) and Neonatal Advanced Life Support (NALS). Furthermore, to better serve Brooklyn, which has a density of apartment buildings and is surrounded on three sides by water, Kingsborough’s curriculum will include instruction in hi-rise extrication (by stair chair) and deep water rescue techniques according to US Coast Guard standards.

   This program is designed to provide the following:

   - A two-year curriculum leading to an AAS in Emergency Medical Service.
   - A transfer option for students who complete the EMT-Basic Program sponsored
by Kingsborough’s Healthcare Institute and receive advanced placement in the
AAS program.

- Professional coursework leading to a Certificate of Completion with which
  students can seek licensure and employment as an EMT-Paramedic.
- A degree option for those already holding EMT–Basic licenses who can receive
  advanced placement into the paramedic courses.
- Continuing education credit required for state license and national certification
  renewal.

B. Status of the Profession

The most advanced level of training for this occupation is EMT-Paramedic. At this level,
the caregiver receives additional training in body function and learns more advanced
skills. The program usually results in an associate in applied science degree and prepares
the graduate to take the NREMT examination and become certified as an EMT-
Paramedic. Extensive related coursework, a major portion of which is clinical and field
experience, is required.

EMTs and paramedics must be free from criminal conviction, emotionally stable, have
good dexterity, agility and physical coordination, and be able to lift and carry heavy
loads. They also need good eyesight (corrective lenses may be used) with accurate color
vision.

Advancement beyond the EMT-Paramedic level usually means leaving fieldwork. An
EMT-Paramedic can become a supervisor, operations manager, administrative director,
or executive director of emergency services. Some EMTs and paramedics become
instructors, dispatchers or physician assistants, while others move into sales or marketing
of emergency medical service equipment. A number of EMTs and paramedics enter the
field at this level to assess their interest in health care, and then decide to return to school
and become registered nurses, physicians or other higher-level health workers.

In 1975, the American Medical Association (AMA) recognized the EMT-Paramedic as
an allied health occupation. The Essentials for EMT-Paramedic Program Accreditation
were developed in 1976 and adopted in 1978 by the AMA Council of Medical Education.
The Joint Review Committee on Education Programs for the EMT-Paramedic (JRCEMT-
P) made the "Essentials" the standard for evaluating programs seeking accreditation
(JRCEMT-P, 1995). JRCEMT-P is now known as CoAEMSP, accredits EMT-P
programs and recognizes EMT-B and EMT-I programs. Only EMT-P accreditation is
done in collaboration with CAAHEP.

The NHTSA curricula are the national standard for EMS education and are referenced in
many State laws and administrative rules as the basis for the scope of practice.

C. National and Local Educational Trends

Emergency medical services (EMS) education has evolved over time and, as is true of
most new professions, no master plan was conceived to guide its evolution systematically. Effective components of quality EMS education have emerged during the last thirty years, including the national standard-EMS curricula, accreditation standards and a national registration system. Unfortunately, these individual parts have developed independently, and currently there is no formal EMS education system in which the components and their roles are clearly defined, their interrelationships articulated, and the decision-making process for modification and improvement established.

In the 1970s, the stakeholders of EMS had no way to predict the challenges that would face the profession during this period of rapid growth. While many of them are volunteers, EMS providers are also paid, full-time personnel. They work in hospital-based or public safety-based programs. Local variations of practice present challenges which are unique to this allied healthcare profession.

A training site must be approved by the State of New York and the City of New York. This is done before any training can begin. Sponsors must complete a needs assessment, which must demonstrate both a community and a student need for the program and that it will not undermine enrollment in currently approved sponsor sites. Sponsor sites typically begin with EMT-B offerings and, after they demonstrate success, can apply for a site upgrade and add the EMT-P courses.

The Regional EMS Council’s Executive Director Marie Diglio (212 870 2301) has provided enrollment information and training sites that are operating locally. After Kingsborough’s application is submitted to the Regional EMS Council (REMSCO), an approval process including a site visit will be conducted. It will then go to the New York State Department of Health where it will undergo an approval process that takes at least 45 days and may include another site visit.

Karen Meggenhoffen, Associate Director, New York State Department of Health, Bureau of Emergency Services, acknowledged that there is a need for more EMT-P graduates in the NYC area, and the largest employers are the NYFD and AMR (American Medical Response, a national ambulance service provider) and several hospital-based private ambulance companies. Statewide, New York has more than 60,000 licensed EMT–Bs. Although most of these are avocational, non-paid volunteers, paid employment is a growing trend.

New York is not a National Registry State. It has its own licensing examinations and does not use the NREMT national credentialing exam system. Currently the pass rate for first-time candidates on this exam is around 90%. The average pass rate for the NREMT exam is significantly lower.

In Fall 2007, Kingsborough’s Continuing Education Department in conjunction with TransCare Training Institute offered the EMT-Basic course for the first time. The success of this program will become REMSCO’s justification for approving the College’s sponsorship of an EMT-P Program. Much of the laboratory and training equipment is currently on hand and the T-4 building has been modified to provide lab space. Students
in the EMT-Paramedic program must be EMT-B licensed prior to enrolling in the EMT-P courses.

At this time, Methodist Hospital in Brooklyn, BMCC and St. Johns University in Queens have EMT-P programs. Monroe College in the Bronx was just approved for EMT-B.

The Council will likely look favorably on a community college as a sponsor and the Regional Council Executive Director, Marie Diglio, thinks we should proceed. There is also a bridge possibility for Paramedics to ADN programs in the State. Marie Diglio will help to identify an appropriate Program Director from among those who are senior instructors with master’s degrees and there are quite a number of these individuals who may be interested in the position.

D. Related College Offerings

Kingsborough is currently offering the EMT-Basic course through Continuing Education. TransCare Ambulance Service, which serves the Brooklyn and New York area, is the largest private EMS provider in New York City and has a currently approved Certified Instructor Coordinator (CIC), has partnered with Kingsborough. We will work with Trans Care Training Institute so that the success of the Continuing Education EMT-Basic course will become the justification upon which the State will consider Kingsborough’s application to offer not only EMT-Basic through Continuing Education, but also the A.A.S. in EMT-Paramedic. TransCare has committed to a lasting partnership from this initial stage through to the implementation of the degree program. TransCare and emergency medical departments in area hospitals will provide clinical and field training sites and be a source of qualified instructors. Donald M. Cardone, EMT-P and CIC, will serve as the course CIC and Arthur J. DeMello, EMT-P and CIC, will teach the curriculum. TransCare’s Medical Director, Victor Politi, MD, has agreed to serve as the Program Medical Director. Dr. Politi is board certified in emergency medicine and is the Director of the St. John’s Emergency Department. He is a former NYC paramedic and was a NYPD Emergency Services Lieutenant.

A fully equipped EMT-B classroom has been created for the EMT-B program offered by Continuing Education. Under consideration is the acquisition of an ambulance for use as an instructional aid for the EMT programs and as a functional unit for college use in case of an on-campus need.

The administration of the College has demonstrated a significant interest in programs of this type by its recent commitment to associate degree programs for surgical technicians and physical therapist assistants. Each has fully equipped laboratories, office space and highly qualified faculty. The College has a long standing A.A.S. in Nursing program which has 42 faculty, 15 of whom are full-time. In addition to the A.A.S. in Physical Therapist Assistant and the A.A.S. in Surgical Technology, the College offers programs in mental health, community health, therapeutic recreation and transfer options to baccalaureate programs in the health professions. The College fully supports these programs with sufficient office space, classrooms and learning laboratories and with
equipment currently used in the field. The College is also in the process of developing a biotechnology program.

In its July 2006 *Report of Institutional Goals* to CUNY, Kingsborough made a commitment to target new certificate and degree programs in health occupations. Currently, Letters of Intent are being prepared for five other health professions programs. These are: Veterinary Technician, Occupational Therapy Assistant, Respiratory Therapist, Radiologic Technology and Pharmacy Technician.

The College is pursuing the creation of a new academic department which will be responsible for the A.A.S. in EMT-Paramedic as well as five other new health-related technician programs. During this initial stage between the Letter of Intent and CUNY approval to develop a full proposal, and until a new department is established, the Department of Nursing has taken responsibility for the development of the A.A.S. in EMT-P.

2. **Need for the Curriculum**

The largest employer in Brooklyn is by far and away health care. A needs study will be conducted according to REMSCO’s standards and as a part of the sponsorship approval process. This review and successful approval process will confirm that there is a significant demand for the program from employers and potential students.

3. **Students**

Kingsborough administration, faculty and counseling staff universally have confidence in the principle of “If we build it; they will come”. Certainly, the population base served by Kingsborough is large enough to project that there will be a strong reaction to educational opportunities at his level for these rewarding professions. Applicant pools for the extant programs are excellent at present. Brooklyn has a population of over 2.2 million and cites its major employer as health care institutions.

Enrollment at Kingsborough Community College (excluding College Now) reached 11,790 students in the spring 2005 semester. In spite of the interest of significant numbers of these students in allied health career education, many do not have access due to the limited number of programs and program seats available. Therefore, there is a need to provide additional, equally viable career programs.

Meetings with representatives from the 1199SEIU League Training and Upgrading Fund indicate significant interest in an EMT-P program for its members who are currently employed in health care. Evening and weekend courses and other non-traditional scheduling will be created to accommodate these students’ time-management issues. Typically, EMT Programs are offered in the evening and on weekends and it is likely that a number of the courses in the curriculum will be offered at these times at Kingsborough. Each major course can be modularized and tied into technology supported instructional resources such as simulation and computer-assisted instruction and testing. Faculty will
be encouraged and supported to use these resources. Clinical experiences can be scheduled throughout the weekday, evening and night as well as on weekends to accommodate student scheduling needs.

Department of Student Development personnel has enthusiastically endorsed this proposed program and has agreed to schedule the shadowing of practicing professionals prior to implementation to strengthen their understanding of the work environment and scope of practice for EMT-Paramedics. This will better equip them to help potential students select the right profession and may increase retention in the program.

4. **Curriculum**

This curriculum is designed to prepare students who will be ready to work anywhere in the United States as highly qualified emergency medical technicians. The curriculum includes the science of human anatomy all health technicians must know and is prerequisite to clinical courses, and the humanities, social science and other general education courses, which are essential for all associate degree graduates, provide a foundation for further higher education and help create a well-rounded individual and citizen.

A. **Description of New Courses**

**100 Emergency Medical Technician-Basic**

**Credit** 5

Upon the successful completion of this course and EMT Clinic I, students are eligible to sit for the New York State EMT-B Certification Exam. Students must also satisfactorily perform all practical skills to achieve a passing grade and successfully complete this course. This course follows the current National Standard Curriculum for EMT-Basic.

**132 EMT Clinic I**

**Credit** 1

A series of clinical observations and ambulance experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete full shifts in hospitals and with an ambulance crew. The number of patient experiences for each student is delineated and some students may have to schedule additional shifts to acquire the acceptable minimum of experiences. Offered in six-week modules.

**110 Paramedic I**

**Credit** 9

Review of all basic level skills and an introduction to advanced skills of the paramedic. Topics include roles and responsibilities, stress management, communications, and medical/legal/ethical issues. Clinical pre-hospital pharmacology, IV access and advanced airway management techniques are introduced. Lab work involves IV access techniques,
endotracheal intubation, computing dosages, preparing medications for administration and practice in all administrative techniques. Skills are learned and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills to successfully complete the course. Prerequisite: EMT-Basic

**Paramedic Clinic I**

**Credit** 2

A series of clinical observations and ambulance experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete full shifts in hospitals and with an ambulance crew. The number of patient experiences for each student is delineated and some students may be required to schedule additional shifts to acquire an acceptable minimum of experiences. Offered during the twelve-week semester. Prerequisite: EMT Clinic I

**111 Paramedic II**

**Credit** 3

An introduction to patient assessment and the management of the trauma patient in the pre-hospital setting. Patient assessment and formulation of a field impression, selecting and implementing an appropriate treatment plan for the trauma patient will be emphasized. Skills related to the practice of advanced pre-hospital care are learned and practiced in the laboratory/hospital/field. Students must satisfactorily perform all practical skills to successfully complete the course. Offered in the six-week module. Prerequisite: Paramedic I

**Paramedic Clinic II**

**Credit** 3

A series of Emergency Room clinical observations and ambulance experiences focused on progressively higher levels of patient care responsibilities. Students will complete full shifts in hospitals and with an ambulance crew. The number of patient experience for each student is delineated and some students may need to schedule additional shifts to acquire the acceptable minimum of experiences. Offered in the six-week module. Prerequisite: Paramedic Clinic I

**210 Paramedic III**

**Credit** 9

Patient assessment and formulation of a field impression, selecting and implementing an appropriate treatment plan for the trauma patient will be continued. Assessment and formulation of field impressions and implementation of an appropriate treatment plan for patients with a wide range of medical complaints including respiratory, cardiovascular, neurological, environmental and obstetrical emergencies. Special skills associated with patient rescue, extrication and movement that are common in the community are covered. These include MVA extrication, deep water rescue, patient transport and safety from
high-rise and limited space environments.
Prerequisite: Paramedic II

247 Paramedic Clinic III

Credit 2
A series of clinical observations and ambulance experiences focused on progressively higher levels of patient care responsibilities. Students will complete full shifts in hospitals and with an ambulance crew. Advance Life support experiences will be managed with progressively higher levels of responsibility by each student in their ambulance experience. The number of patient experiences for each student is delineated and some students may need to schedule additional shifts to acquire the acceptable minimum of experiences. Field practice in MVA extrication, rescue, patient transport and practitioner safety are covered. Offered in the twelve-week semester.
Prerequisite: Paramedic Clinic II

211 Paramedic IV

Credit 3
Patient assessment and formulation of a field impression, and selecting and implementing an appropriate treatment plan for neonatal, pediatric and geriatric patients, patients with diverse needs and chronically ill patients. The student will also learn how to safely manage the scene of an emergency. Students will complete nationally recognized Certification instruction for Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS) and Neonatal Advanced Life Support (NALS) during this course. Summative program written examinations are also part of this course.
Prerequisite: Paramedic Clinic II

Paramedic Clinic IV

Credit 3
A series of clinical observations and ambulance experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete full shifts in hospitals and with an ambulance crew. The number of patient experiences for each student is delineated and some students may need to schedule additional shifts to acquire the acceptable minimum of experiences for the total program. Final assessments of all skills covered in the entire program of study is in this course. Offered in the six-week module. Prerequisite: Paramedic Clinic III

An outline of the entire 60-credit curriculum follows:
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## EMT-Paramedic Full-Time (4 semester) Program of Study

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* Uses Winter or Summer module

### 5. Faculty

The faculty of Kingsborough’s EMT-Paramedic Program will meet or exceed the minimum requirements of the CoAEMS and New York State as follows:

There will be a full-time program director who holds at a minimum, a master’s degree; is proficient in instruction, curriculum design, program administration and evaluation, and student advisement; is a New York State Certified Instructor...
Coordinator and a Senior Instructor. The EMT-B course will be managed by another New York CIC who will have responsibility for that program. The EMT-B can be part-time or full-time and can teach in the Paramedic Program.

There will be a Medical Director who according to the CoAEMSP standards must:

1) be a physician currently licensed to practice medicine in New York with experience and current knowledge of emergency care of acutely ill and injured patients,

2) have adequate training or experience in the delivery of out-of-hospital emergency care, including the proper care and transport of patients, medical direction, and quality improvement in out-of-hospital care,

3) be an active member of the local medical community and participate in professional activities related to out-of-hospital care,

4) be knowledgeable about the education of the Emergency Medical Services Professions, including professional, legislative and regulatory issues regarding the education of the Emergency Medical Services Professions.

Other program faculty will be qualified to teach the subject assigned and hold appropriate professional credentials.

6. **Facilities, Laboratory Equipment, Supplies and Library Materials**

Kingsborough Community College already has an appropriate lab facility created for the new EMT-B program. This laboratory and classroom space will serve the EMT-Para for the initial years of implementation. Each full-time faculty member will have appropriate office space as well.

Several professional journals and texts should be added to the Kibbee Library in sufficient numbers to support student assignments. The Library will need to provide online access to Medline. Usually arrangements can be made with hospitals and medical schools for students to have access to any medical journals or text they may need. Local hospital libraries can be appropriate resources and will meet all national standards as long as these arrangements are established and known to students, including any conditions for access students must follow.

7. **Cost Assessment**

Annual budgets for typical EMT-P programs include on-going disposable supplies as well as equipment for the laboratory and classroom, continuing education for faculty, accreditation fees and other miscellaneous items. Some of the equipment for a typical EMT-P program can be acquired by donation, rented or borrowed. The cost of equipping an EMT-P learning laboratory can approach $100,000. The cost of a full-time instructor
and program director, plus a medical director and the minimum of an adjunct EMT-B instructor, will total approximately $180,000. The College will provide the funds from its operating budget for any equipment and supplies which cannot be acquired through any other funding source.