CoAEMSP is providing this document as a sample to illustrate the type of information that might apply. The names used are fictitious and any resemblance to actual persons or locations is purely coincidental and unintentional.

Since each program is unique, responses provided in the sample document would not be exactly the same for another program. It is not appropriate for programs to copy and paste verbatim any sample information into their own documents.

Specific questions about the preparation of accreditation documents can be directed to the CoAEMSP Executive Office. (www.coaemsp.org/contact.htm)
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PREAMBLE

The policies of the EMS program are intended to provide a safe and professional educational experience for EMS students. It is important for each student to understand and follow both the letter and spirit of each policy. From time to time, situations will present themselves which are not covered by specific language of the polices and procedures. In such cases students and faculty will be guided by best judgment, best practices, professional ethics, and the intent of current written polices and procedures.

Regardless of written language, students must, at all times, present themselves as a professional member of an elite community. Students who fail to represent the pride, integrity, and wholesomeness expected of EMS Personnel will be considered in violation of polices, whether written or unwritten, and removed from the EMS program. The standards of professionalism of the EMS community will be set by program officials and not the student.

AMERICANS WITH DISABILITIES ACT - ALLOWABLE ACCOMMODATIONS

The Americans with Disabilities Act (ADA) of 1990 has implications that pertain to licensure or certification.

The law permits testing that requires the use of sensory, manual or speaking skills where the tests are intended to measure essential functions of the profession. For example, an applicant with reading difficulties is required to take a written exam since the ability to read is an essential function of EMS. Exams are designed at least in part to measure the student’s ability to read.

A second example is one dealing with skills proficiency verifications that must be performed within established time frames. Performing a skill within established time frames is required because speed of performance is an integral part of patient care.

Both the ability to read and the ability to perform skills within time frames are essential functions for an EMS provider. Therefore, in EMS, a person with a disability may not be denied the opportunity to take an examination; but this person shall be required to take a written exam and pass the skills proficiency verifications within established criteria.

The Functional Job Description, outlined at the end of this section, describes the required skills and job requirements essential to EMS personnel. This description will guide all accommodations permitted for the EMT and paramedic students.

The following specific points pertain to those involved in EMS training and education programs:

- Students cannot be discriminated against on the basis of a disability in the offering of educational programs or services.
- There can be no accommodation during screening, evaluation or course examinations that will compromise or fundamentally alter the evaluation of skills that are required to function safely and efficiently in the profession.
- Students who have received an accommodation during the course need to fully understand that there is a separate process for requesting an accommodation for the written certification exam and eligibility for an accommodation is determined on a case-by-case basis. In other words, just because a student was allowed an accommodation during the course does not guarantee an accommodation for the National Registry exam. Documentation confirming and describing the disability should be submitted according to policy for consideration.

There are accommodations that are not allowed in the EMS Program because they are not in compliance with the essential job functions of an EMT or paramedic as outlined in the Functional Job Description. These include, but are not limited to:
1. **Students are not allowed additional time for skills with specific time frames.**
   - Obviously patients would suffer due to life threatening conditions in emergency situations if treatment were delayed.
2. **Students are not allowed unlimited time to complete a written exam.**
   - This request is not considered reasonable because a candidate should be able to complete a test within a finite amount of time.
   - Students will be allowed a maximum of time and one-half to complete written exams.
3. **Students are not allowed to have written exams given by an oral reader.**
   - The ability to read and understand small English print is an essential function of the profession, and written exams are designed, at least in part, to measure that ability.
4. **Students are not provided a written exam with a reading level of less than grade eight.**
   - The EMS profession requires a reading level of at least grade eight to work safely and efficiently.
5. **Students must take all exams during the scheduled time, as a member of the enrolled class.**
   - The ability to utilize knowledge on the spur of the moment is an essential task for EMTs and paramedics.
   - Exams are given to elicit immediate recall and understanding of emergency situations.
   - Students will be permitted a private space to take the exam.
   - Refer to the written examination policy of missed exams due to excused absences.
6. **Students must answer all written test questions as written. No explanation of the question can be provided by the test proctor or any other individual.**
   - Additional descriptions of test questions would not be a reasonable accommodation because reading and understanding written English is an essential part of EMS communication.
   - Student must be able to understand and converse in medical terms appropriate to the profession.

Because of the critical nature of the tasks needed in emergency situations, accommodation requests are considered very carefully, on a case by case basis. The safety and welfare of the community must be insured while providing full protection of the certification applicant’s rights. The main question to be considered is: with the accommodation being requested, can this individual perform the essential functions of the job safely and efficiently?

For more information on the *Americans with Disabilities Act*, you may call the Governor’s Committee for Persons with Disabilities at (308) 555-5739.

**Functional Position Description**
**ECA / EMT / EMT-I / EMT-P**

**Introduction**
The following general position description for the FR, EMT, EMT-I and EMT-P is provided as a guide for advising those interested in understanding the qualifications, competencies and tasks required for emergency medical services certification. It is the ultimate responsibility of an employer to define specific job descriptions within each Emergency Medical Services (EMS) entity.

**Qualifications**
To qualify for EMS certification or licensure an individual must successfully complete a State approved course and achieve competency in each of the psychomotor skills. In addition the individual must achieve a passing score on the state written certification or licensure examination.

EMS personnel must be at least 18 years of age. Generally, the knowledge and skills required show the need for a high school education or equivalent. EMS personnel must have the:
- Ability to communicate verbally via telephone and radio equipment
- Ability to lift, carry and balance up to 125 pounds (250 pounds with assistance)
- Ability to interpret written, oral and diagnostic form instructions
- Ability to use good judgment and remain calm in high-stress situations
- Ability to work effectively in an environment with loud noises and flashing lights
- Ability to function efficiently throughout an entire work shift
- Ability to calculate weight and volume ratios and read small print, both under life threatening time constraints
- Ability to read and understand English language manuals and road maps
- Ability to accurately discern street signs and address numbers; ability to interview 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 as to status of patient.

EMS personnel should possess good manual dexterity, with ability to perform all tasks related to highest quality patient care. Ability to bend, stoop and crawl on uneven terrain and ability to withstand varied environmental conditions such as extreme heat, cold and moisture is vital. The ability to work in low light, confined spaces and other dangerous environments is required.

Description of Tasks:
- Receives call from dispatcher, responds appropriately to emergency calls, reads maps, may drive ambulance to emergency site, uses most expeditious route and observes traffic ordinances and regulations.
- Determines nature and extent of illness or injury, takes pulse, blood pressure, visually observes changes in skin color, auscultates breath sounds, makes determination regarding patient status, establishes priority for emergency care, renders appropriate emergency care (based on competency level); may administer intravenous drugs or fluid replacement as directed by physician.
- May use equipment (based on competency level) such as but not limited to, defibrillator, electrocardiograph, performs endotracheal intubation to open airway and ventilate patient, inflates pneumatic anti-shock garment to improve patient’s blood circulation or stabilize injuries.
- Assists in lifting, carrying, and transporting patient to ambulance and on to a medical facility.
- Reassures patients and bystanders, avoids mishandling patient and undue haste, searches for medical identification emblem to aid in care.
- Extricates patient from entrapment, assesses extent of injury, uses prescribed techniques and appliances, radios dispatcher for additional assistance or services, provides light rescue service if required, provides additional emergency care following established protocols.
- Complies with regulations in handling deceased, notifies authorities, arranges for protection of property and evidence at scene.
- Determines appropriate facility to which patient will be transported, reports nature and extent of injuries or illness to the facility, asks for direction from hospital physician or emergency department.
- Observes patient in route and administers care as directed by physician or emergency department or according to published protocol.
- Identifies diagnostic signs that require communication with facility.
- Moves the patient into the emergency facility from the ambulance.
- Reports verbally and in writing concerning observations about the patient, patient care at the scene and in route to facility, provides assistance to emergency staff as required.
- Maintains familiarity with all specialized equipment.
- Replaces supplies, sends used supplies for sterilization, checks all equipment for future readiness, maintains ambulance in operable condition, ensures ambulance cleanliness and orderliness of equipment and supplies, decontaminates vehicle interior, determines vehicle readiness by checking oil, gasoline, water in battery and radiator and tire pressure.
CELL PHONES, PAGERS, AND ELECTRONICS

To eliminate distractions in the classroom the following policy will be followed by all students enrolled in the Emergency Medical Services Program.

- Cell phones are NOT to be used in the classroom, laboratory or clinical areas, or in hallways and common areas of the college. This includes use as a phone, text messaging device, music player, voice recorder, camera, video camera, or any other function which distracts the student from learning in class or disrupts others at any time. This policy is not limited to devices sold as a cell phone. Any electronic device which meets the spirit of this policy is included.
- All cell phones, pagers, and other electronic devices which have an audible alert function must be turned off. Silent alerts may be used as long as they are truly silent AND do not elicit a response from the owner or others.
- Electronic devices that are used for audio recording or playback, or video recording or playback, are not to be used in the classroom, laboratory or clinical areas, or in hallways and common areas of the college. Students may use, with instructor permission, audio recorders for the sole purpose of recording lectures.
- Electronics devices with game functions are not to be used in the classroom or clinical settings.
- Students who violate this policy will be asked to leave campus for the day on the first offense. A second offense will warrant reporting of the student to the Dean for action as a disruptive student which may result in removal from the program.

CLASSROOM SKILLS PRACTICE

During the course of this program, students will be taught skills necessary for the assessment and management of patients in emergency situations. It is essential that students practice and perfect these skills using human subjects. All students are hereby advised that the practice of both non-invasive and invasive skills will be practiced on classmates, and that classmates will be practicing these same skills on you. The purpose of these practice sessions is to develop the tasks, dexterity, and tactile feel, necessary for each skill, in situations as real as possible, under the control and supervision of program instructors. The practice of these skills will involve limited physical contact with all areas of the human body including the areas of the chest and pelvis.

The EMS Program is acutely aware of both the importance of hands on human practice and the risk of inappropriate behavior. All students involved in these skills practice sessions, in the role of the rescuer, the patient, or as an observer, are expected to display tact and professionalism, as well as to behave under ethical and legal guidelines.

At anytime, should a student believe that the practice of a particular skill places her or himself in an uncomfortable position, that student has the responsibility to make that belief known to the instructor prior to beginning the skills practice.

At anytime, should a student believe that the practice of a particular skill on themselves by another student or as demonstrated by an instructor, crosses a line of professionalism, into overt sexual contact, that student has the responsibility to make that belief known to both the student or instructor involved and to the Program Director as soon as possible. Any student who perceives that he or she has been treated in a discriminative manner on the grounds of sex may consult with or file a written complaint with the dean of student development and educational services.
Specific skills which will be practiced in this program, and which may involve practice in or around the chest or pelvis include:

- Traction Splinting
- Foreign Body Airway Obstruction
- Patient Assessment / Physical Exam
- Blood Pressure by Auscultation
- Blood Pressure by Palpation
- Dressing and Bandaging
- Splinting

Auscultation of Breath Sounds
Assessment of Pulse and Respirations
Application of ECG Electrodes
Application of 12-Lead ECG Electrodes
Supine Spinal Immobilization
Seated Spinal Immobilization

The practice of skills is an essential part of the EMS Program. Students must come to laboratory sessions fully prepared to practice skills and scenarios. Being prepared means being **IN UNIFORM** and having the appropriate equipment ready and available (as listed below). Additionally, scenario practice requires an attitude and demeanor which do not detract from the scenario created. Remaining “in character”, communicating with the “patient” as if a real patient, and performing all skills as appropriate, following procedures step-by-step.

**Required Equipment** - to be supplied by the student

- Gloves (sufficient to be replaced several times in a skills session)
- Goggles
- Masks
- Stethoscope
- Penlight
- Pen
- Note pad
- Watch
- Skills Procedure Manual

Failure to have all required equipment available for the skills practice session will prevent the student from remaining for the skill practice session.

**CLINICAL EVALUATIONS**

Clinical Evaluations must be submitted to the instructor on the next scheduled class period. Failure to submit clinical evaluations on the next scheduled class period will negate the hours (but not the experience) earned during the rotation, requiring the clinical to be repeated. Repeat clinical rotations must be completed before the end of the semester in which the clinical was originally scheduled.

Evaluations are to be given to the instructor **ONLY** upon request. **DO NOT** place rotation forms on the instructor's desk, under the instructor's door, or on the front lectern unless specifically asked to do so by the instructor.

Clinical evaluations must be an accurate representation of the clinical experience. Falsification of the clinical experience is grounds for disciplinary action up to and including removal from the EMS Program. Additionally, the EMS program may elect to, or be required to, report the incident to the Department of State Health Services for decertification under EMS Rule §157.36 (b) 4 and (c) 5. Preceptors, fellow students, and other certified or licensed health care providers may face disciplinary action of a similar nature for assisting misrepresentation of the clinical experience.
CLINICAL ROTATIONS

Clinical rotations are an essential component of the EMS Program. Each clinical is intended to offer the student both a positive learning opportunity and real life experiences. The primary purpose of clinical rotations is to expose the student to patient assessment including the gathering of pertinent medical information and past medical history. The practice of basic and advanced skills, and patient documentation are secondary, but highly essential, parts of clinical rotations.

While on clinical rotations:
- Students are to be dressed in the ACC Clinical Uniform. (see Uniform Policy for additional information)
- Students are to display a professional attitude while seeking out learning opportunities without interfering in the emergency care of patients or infringing on patient confidentiality.
- Students must NOT participate in any amorous or sexual behaviors toward preceptors, patients, or others encountered.
- Students must function in the student capacity, regardless of previous affiliations or employment with the clinical site. Although employers are free to compensate students for clinical rotations, students must function 100% of the time as a student or intern. Students are not to be substituted for paid personnel.
- Students are allowed to leave the assigned unit of the clinical site to eat lunch or dinner. Students will be given 30-minutes to eat, and must eat on the campus of the clinical site.

To receive a passing grade for the clinical component of each course, students must accomplish the following, by the course completion date:
- Complete the required number of clinical hours (including all required repeat or make-up rotations), at each clinical site, as described by the instructor at the beginning of each course. Documentation of these hours must be submitted to the instructor on the proper form, and signed by the preceptor.
- Complete all minimum runs and minimum numbers of skills, as required in the clinical information given by the instructor at the beginning of each course.
- Perform assessments and interventions to the satisfaction of the preceptor, as documented on the clinical forms.
- Meet the standards of professionalism set by the ACC EMS Program, including appropriate dress, actions, demeanor and language.

Clinical rotations which receive an unsatisfactory evaluation must be repeated prior to the completion of the program. A grade of incomplete WILL NOT BE GIVEN for make-up rotations.

Grades of incomplete will be given only when unexpected medical conditions prevent the completion of clinical rotations before the course completion date. Grades must be converted to a passing grade by the date published in the college catalog, or before the next semester begins if necessary.

Students are to schedule clinical rotations in a manner which does not interfere with job or school schedules. Once clinical rotations are scheduled, they are considered part of the class schedule and attendance is MANDATORY.

Rescheduling Clinical Rotations
Each student is allowed to reschedule TWO (2) rotations per semester. Allowable reschedules:

Prior to the Rotation:
- Work schedule changes *
- Change of jobs **
- Important family events
- Scheduled medical tests and procedures
Missed Rotations (must notify the EMS Program **BEFORE** missing the rotation - Call 308-555-1235)
- Illness
- Mandatory employment responsibilities (documentation required)

Students who fail to contact the EMS program prior to missing a scheduled rotation will be charged $25 before allowed to reschedule the rotation. A reschedule voucher will be given by the Business Services office of the Northeast Campus once the fee is paid.

A Clinical Rescheduling form must be completed for each rotation rescheduled. This form must be submitted to the instructor along with the Clinical Evaluation forms.

  * Upon approval from the Program Director, and with proof of an **employer mandated** schedule change, students may be allowed to reschedule more than two rotations.
  ** Upon approval from the Program Director, and with proof of a **job change**, students may be allowed to reschedule more than two rotations. Taking a second job will not be considered a job change.

**CONFLICT RESOLUTION**

The Emergency Medical Services Program and Accordance Community College recognize that students will, from time to time, encounter disheartening, unpleasant and occasionally hostile situations. These situations may stem from interaction between individual or groups of other students, faculty, clinical preceptors or clinical sites, the general public, or the witnessing of emotionally traumatic events.

While the EMS Program cannot protect students from the dangers and harsh realities of the world which are encountered on clinical rotations, we will make every effort to give the student the knowledge and skills necessary to protect themselves. To a great extent the student must take the responsibility to use these tools at the appropriate time. This includes situations in which the language, attitude, and behavior of other students, clinical personnel and program faculty may innocently or maliciously be offensive or derogatory based on race, religion, gender, ethnic background, national origin, age, veteran status, or disability. The first step in any of these cases is to notify the involved party of the offense. Should the offensive behavior continue, the student should notify the next person up the Chain of Command, as delineated below.

In the best interest of all parties involved, students enrolled in the EMS Program must abide by the following procedures.

**Conflicts Occurring in the Classroom** - Student conflicts are expected to be handled between the parties involved. In the event that the situation cannot be resolved peaceably between the individual or group of students, the course instructor or Program Director should be notified. The situation will be corrected following Program policies, grading criteria, instructional intent and course objectives.

The following chain of command should be followed for problems encountered with the instruction and skills practice in the EMS Program:
- Parties involved
- Instructor / Faculty / Staff present at time of incident
- Course Instructor
- Program Director

**Conflicts During Clinical Rotations** - Any situation occurring on clinical rotations are to be reported, immediately, to the student’s immediate supervisor at the clinical site (usually the assigned preceptor) and progress up the chain of command for that clinical site. In the event the situation involves the immediate supervisor, an attempt at problem resolution should be made without moving further up the chain of command. In the event the immediate supervisor cannot resolve the situation, the next person in the chain of responsibility should be contacted. Problems regarding differing protocols, treatment
modalities, or patient care philosophies should be addressed and resolved with an openness for these differences taking into consideration the wide variety of “correct” treatment. In the event the problem cannot be resolved at the clinical site, the student should report the situation to their course instructor or Program Director at their earliest opportunity. Reporting the problem directly to Program Faculty without consulting the clinical personnel is not permitted without extenuating circumstances. The definition of extenuating circumstances will be determined by the course instructor or Program Director.

Students should understand that the EMS Program is concerned with conflicts encountered while on clinical rotations. However, students should also understand that the clinical site has a vested interest in resolving the problem internally.

It will be the prerogative and responsibility of the clinical site to report problems and resolution decisions to the EMS Program.

The following chain of command should be followed for problems encountered during clinical rotations:
- Parties involved
- Assigned Preceptor
- Duty Supervisor / Station Officer / Charge Nurse
- Course Instructor
- Program Director

DISRUPTIVE ACTIVITIES
The College may initiate disciplinary action against any student involved in disruptive activities. Any activity that interrupts scheduled activities or the process of education may be classified as disruptive. The following conditions shall normally be sufficient to classify such behavior as disruptive.
- Participation in or inciting others to violent behavior such as assault, physical abuses, or threatened physical abuses to any person on campus or at any function off-campus sponsored by the College.
- Loud, vulgar, or abusive language or any form of behavior acted out for the purpose of inciting others to disruptive action.
- Blocking or in any way interfering with access to any facility of the College.
- Holding rallies, demonstrations, or any other form of public gathering without prior approval of the College.
- Conducting an activity which causes College officials to interrupt their scheduled duties to intervene, supervise, or observe activities in the interest of maintaining order at the College.

EXAMINATIONS
Major exams must be taken during the scheduled and allotted time. If circumstances require missing a major exam, the student must make arrangements with the assigned instructor to take a make-up exam prior to attending the next scheduled class session and within the next three business days. Failure to complete the makeup exam within three business days will earn the student a grade of zero (0) on the exam. Makeup tests will not be given without an appointment.

GRADING
Emergency Medical Technician
To pass each course of the EMT program students must earn a minimum grade of C or CR. Failure to earn the minimum grade in any course constitutes failure from the program.
Clinical Sections
To pass clinical sections students must complete the minimum number of required contact hours. In addition, passing the clinical section requires that all minimum patient contacts and procedures be achieved, and that preceptor evaluations identify the student as minimally competent. Preceptor evaluations which indicate unsatisfactory performance may result in failure of the clinical section.

Didactic Sections
Each didactic section has three grading domains. A passing grade must be achieved in each domain to pass the course. If all three domains are passed the letter grade will be assigned based on the performance in the Cognitive domain. Failure of the Affective or Psychomotor domain will earn a grade of “D”. Failure of the cognitive domain will be given the earned grade.

Affective domain measures the student’s attitudes, behaviors, and professional attributes, as well as classroom conduct. Passing is appropriate classroom behavior, professional ethics, and adherence to policy. Breaches will result in student conference. Significant behavioral issues may result in failure of the affective domain. In most cases a written warning and time period for improvement will be given before assigning a failing grade. However, in cases where the behavior is significantly unacceptable, egregious, or poses a threat to the well being of others, the posting of a failing grade may be immediate and without warning.

Cognitive domain is the student’s knowledge as demonstrated by written exams and assignments. The grading scale for the EMT course(s) is:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90 to 100</td>
</tr>
<tr>
<td>B</td>
<td>80 to 89.9</td>
</tr>
<tr>
<td>C</td>
<td>70 to 79.9</td>
</tr>
<tr>
<td>D</td>
<td>60 to 69.9</td>
</tr>
<tr>
<td>F</td>
<td>Below 60</td>
</tr>
</tbody>
</table>

A grade of 70% or higher must be earned on major exams. Students will be allowed two (2) grades less than 70% in each course. A third grade below 70% will result in failure of the course.

Calculation of final cognitive grades comes from the following formula:

<table>
<thead>
<tr>
<th>Grade Domain</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major Examinations</td>
<td>50%</td>
</tr>
<tr>
<td>Daily tests / Homework</td>
<td>10%</td>
</tr>
<tr>
<td>Final Exam</td>
<td>40%</td>
</tr>
</tbody>
</table>

After all work has been completed, the student must have a final average of 70% or better.

Psychomotor domain is the student’s ability to perform skills and tasks learned in the program. The student must pass each skill following the practical examination policy. Failure to pass all skills as described in the practical examination policy will constitute failure of the psychomotor domain.

Paramedic
To pass each course of the Paramedic program students must earn a minimum grade of C or CR. Failure to earn the minimum grade in any course constitutes failure from the program.

Clinical Sections
To pass clinical sections students must complete the minimum number of required contact hours. In addition, passing the clinical section requires that all minimum patient contacts and procedures be achieved, and that preceptor evaluations identify the student as minimally competent. Preceptor evaluations which indicate unsatisfactory performance may result in failure of the clinical section.
Didactic Sections
Each didactic section has three grading domains. A passing grade must be achieved in each domain to pass the course. If all three domains are passed the letter grade will be assigned based on the performance in the Cognitive domain. Failure of the Affective or Psychomotor domain will earn a grade of “D”. Failure of the cognitive domain will be given the earned grade.

Affective domain measures the student’s attitudes, behaviors, and professional attributes, as well as classroom conduct. Passing is appropriate classroom behavior, professional ethics, and adherence to policy. Breaches will result in student conference. Significant behavioral issues may result in failure of the affective domain. In most cases a written warning and time period for improvement will be given before assigning a failing grade. However, in cases where the behavior is significantly unacceptable, egregious, or poses a threat to the well being of others, the posting of a failing grade may be immediate and without warning.

Students will be graded on a decreasing scale. Each student begins each semester with an Affective grade of 100%. As the course progresses, points will be deducted for each attendance issue (absence, tardy or leaving early), uniform issue, participation issue, or professionalism issue. Students must have a grade of 70% or better to earn a passing Affective grade.

Cognitive domain is the student’s knowledge as demonstrated by written exams and assignments.

The grading scale for the paramedic course(s) is:

- 90 to 100 A
- 80 to 89.9 B
- 70 to 79.9 C
- 60 to 69.9 D
- Below 60 F

A grade of 70% or higher must be earned on major exams. Students will be allowed two (2) grades less than 70% in each course. A third grade below 70% will result in failure of the course.

Calculation of final cognitive grades comes from the following formula:

Major Examinations 50%
Daily tests / Homework 10%
Final Exam 40%

After all work has been completed, the student must have a final average of 70% or better.

Psychomotor domain is the student’s ability to perform skills and tasks learned in the program. The student must pass each skill following the practical examination policy. Failure to pass all skills as described in the practical examination policy will constitute failure of the psychomotor domain.

GRIEVANCE POLICY

It is the practice of ACC to assist all students in finding fair and just solutions to problems related to their education. As a general rule, problems can be resolved through the normal administrative structure (levels of supervision). The grievance procedure is not intended to circumvent the normal channels of communications or to set aside the "open door policy" for students established by faculty and administrators.

If students feel they have been discriminated against based on sex, race, color, national origin, veteran status, handicapped, or age, they are to follow the procedures below:
• **Definition:** A grievance is an educational or personal problem or condition that a student believes to be unfair, inequitable, or discriminatory, or a hindrance to his/her education.

• **Scope and Limitations:** This grievance procedure is not designed to include changes in policy or educational programs. Recommendations for initiating new policy or changing established policy are handled through normal administrative channels.

• **Time Limitations:** Grievances shall be handled with reasonable promptness, both in submission and processing at each level. Reasonable promptness is defined as a maximum of five class days; however, this time may be extended with the agreement of both parties.

• **Presentation:** Initially, the presentation of a grievance may be made orally. When it reaches the appeal state, it must be made in written form. Students shall be given full opportunity to present their views without fear of coercion or reprisal.

• **Procedure:** Students who feel they have a College-related grievance should discuss it with the individual(s) involved. The simplest, quickest, and most satisfactory solution will be reached most often at this level. If the discussion at that level does not resolve the matter to a student's satisfaction, the grievance may be appealed to the next level of supervision, proceeding through the regular line of authority. At this point, if the matter is still not resolved to the satisfaction of the student, an appeal may be made to the Appeals Committee. The Appeals Committee shall hear only information pertaining to the grievance.

• **Appeals Committee:** The grievance must be stated in writing. The Appeals Committee shall hear the grievance and make a recommendation. The Appeals Committee shall be ad hoc and shall be composed of the dean of student development and educational services, three students, and three faculty members.

• **Final Appeal:** The Board of Trustees of ACC shall represent the final stage for review and decision. The Chancellor may choose to review and render a decision on any case before it goes to the Board of Trustees.

### HAZING

Hazing is forbidden by state laws. Hazing is defined as follows:

- Any actions which seriously imperil the physical well-being of any student.
- Activities which are by nature indecent, degrading, or morally offensive.
- Activities which by their nature may reasonably be assumed to have a degrading effect upon the mental attitude.

### INCIDENT REPORTING

Students involved in incidents which result in personal injury, injury to another person, or damage to property should report the incident to the appropriate person as described in the reporting process in this policy. When such incidents occur while on clinical rotations, the incident report procedure for the entity involved should be followed. The EMS Program should be notified as soon as possible. As soon as any danger or threat has past, the student must complete an incident report outlining the events immediately preceding, during and any action taken following the incident. This report must be submitted to the Program Director as soon as practical.

### INFECTION CONTROL

It is the intent of Accordance Community College that each student enrolled in a health related curriculum meet the objectives necessary for successful completion of that program. This enrollment is inclusive of clinical experience which entails potential exposure to individuals with communicable diseases.
All students enrolled in a program which includes clinical rotations must have a completed physical exam on file. This physical must be performed by a physician and must attest to:

- The immunization or immunity to tetanus/diphtheria, rubella, mumps, measles, chickenpox, and hepatitis B;
- Vaccination against hepatitis A is recommended; and
- A test for tuberculosis which will be in date for the duration of the program.

These immunizations and tests are requirements of the State Health Department. They are STATE LAW and as such are not negotiable, nor may they be deemed unnecessary by your physician. No student may begin clinical rotations without these immunizations and test documented on the official ACC Health Science Immunization and Health Record.

Because the student must know how to prevent the spread of infectious diseases for his or her safety and for the safety of others, it is the policy of Accordance Community College that principles of infection control be included in the curricula of health occupation programs. It is then the responsibility of students to apply appropriate precautionary measures when providing services to all patients. These measures may include, but are not limited to, hand washing and the use of gloves, masks, protective glasses and gowns as indicated by the circumstances involved in the treatment of a particular patient.

Before beginning clinical rotations, each student must demonstrate a satisfactory understanding of the importance of body substance isolation, personal protection from airborne and blood borne pathogens, and the reporting/notification process for exposure to infectious patients.

Students assigned to affiliated clinical sites must comply with the infection control policy of the entity to which they are assigned. As new information becomes available, instructors will disseminate the finding to all students.

For the protection of the student, students should not participate in any procedure which would expose the student to blood or body fluids from a patient with a KNOWN infectious disease, while on a clinical rotation. Upon identifying an infectious patient, students are to use tact and courtesy to inform the preceptor of this policy.

Skill practice sessions will be conducted with the intent of preparing students for the practice of patient care on known or suspected infectious patients. All students will wear gloves at all times when in skills practice sessions. Eye protection will be worn during the practice of airway control procedures, peripheral venipuncture, medication administration, or other procedures which could potentially expose the student to the splash or spray of blood or body fluids. At the completion of each skill practice session students must remove their gloves and wash their hands before handling personal equipment. GLOVES ARE NOT TO BE WORN IN THE HALLWAY BETWEEN PRACTICE SESSIONS.

MAINTENANCE OF CERTIFICATION

Paramedic Students must be currently certified by the State an Emergency Medical Technician or as an Emergency Medical Technician - Intermediate. It is the responsibility of the student to keep the certification current.

If during the course of the paramedic program, a student’s EMS Certification expires, the student will NOT BE PERMITTED to participate in Clinical Rotations. If the Lapse of certification exceeds 90 days, the student will NOT BE PERMITTED to participate in any program activity including, but not limited to, lecture presentations and laboratory practice. Students must have a current EMS Certification to receive a Registration Petition allowing registration for each semester.

PATIENT CONFIDENTIALITY
Patient information garnered during clinical rotations is considered confidential both ethically and, in many cases, legally. Discussion with preceptors and instructors is permitted when used for educational or stress management purposes only, and when in private setting. Any other open or public discussion of any confidential patient information outside the clinical setting is strictly prohibited. Confidential patient information is defined as any information which would specifically identify an individual. This includes, but is not limited to: name, address, Social Security number, or driver’s license number. At times this may also include specific details, not generally known to the public, which involve a media event.

PRACTICAL EXAMINATIONS

Practical examinations are conducted to assess the student’s competency in the performance of skills used in patient care. These examinations will be conducted at the conclusion of each semester, as printed in the course schedule. To pass the semester, and the program, students MUST pass all required examinations.

Retests of failed practical examinations will be permitted, provided:
- A majority (greater than 50%) of the practical examinations have been passed on the initial attempt.

No retests will be permitted for a student who fails a majority (greater than 50%) of all practical skills. The student will receive a failing grade in the course enrolled, and will not be able to continue in the program.

Prior to retesting practical examinations:
- The student will be allowed to view the practical examination score sheet and discuss with a program instructor the reason for the failure.
- Upon request, equipment and supplies will be provided and the student will be allowed to practice the skills, with the help of fellow students.
- Program instructors ARE NOT permitted to assist students with skills practice, or participate in retraining, at any time once the course has begun practical examinations.

If a student fails a retest of the practical examinations, that student may petition the Program Director for a second retest. Petitions forms may be obtained through the course instructor. A second retest will be granted, for one skill and one skill only. A failure of two or more skills will not be permitted. To be eligible for a second retest:
- The student’s grade point average must be a grade of B or better, or have an average which is passing and has shown consistent improvement on through the course.
- The student’s attendance in the course must equal or exceed 70% of the total class, and equal or exceed 70% of laboratory classes.
- The student must have no record of student conferences requiring probation or disciplinary action.

A second retest will be conducted by a panel of two examiners, and will be conducted on a time permitted basis. In the event the second retest cannot be conducted during the regularly scheduled time period for practical examinations for the class the candidate is enrolled, a grade of incomplete will be given for the course and a practical examination session will be scheduled at a time agreeable by the EMS program and the candidate. The scheduled practical examination session must be scheduled in the first three weeks of the next regularly scheduled semester. If the candidate fails to retest, or fails any of the skills in the set, a grade of “F” will be recorded as the official grade.

PRACTICING ADVANCED SKILLS
Students enrolled in the paramedic program may practice advanced skills, in the presence of a program instructor or clinical preceptor, while on clinical rotations only.

The student liability policy covers students to perform advanced skills during scheduled clinical rotations. Students who are otherwise licensed or certified to perform advanced skills are advised that the liability insurance does not cover them in the non-student capacity. This advice applies to students who’s Medical Director has approved them to practice skills above their current level of training.

Refer to State EMS Rules for clarification.

Students are limited to practicing only skills previously taught by the faculty of the ACC EMS Program.

Students enrolled in the EMS Program may accept invitations to ride with EMS agencies as a citizen of the community. However, students will not be considered by ACC to be conducting a clinical rotation and are not permitted to wear a ACC clinical uniform or represent ACC in any fashion.

Violations of this policy may result in the immediate removal of the student from further clinical rotations, which would prevent the student from completing the paramedic program.

PROFESSIONAL RESPONSIBILITY

While on campus or on clinical rotations all students are expected to conduct themselves in a professional and ethical manner. This includes proper wearing of the classroom or clinical uniform and proper use of professional vocabulary to reflect well on this school and the EMS profession. The use of foul, profane, vulgar, or sexually explicit or illicit words or phrases are specifically prohibited.

Failure to maintain a professional attitude and behave within ethical guidelines, or the use of inappropriate words or phrases WILL result in removal from the EMS Program - in some cases WITHOUT written warning.

RECOGNIZING STRESS

Students involved in clinical rotations encounter uncontrolled situations often exposing the worst the world has to offer. These situations, either individually or through accumulation, can prove difficult to handle for both inexperienced and veteran personnel alike. Students who encounter an emotionally traumatic event or who begin to feel the accumulation of these events, should notify their course instructor or Program Director as soon as possible. Students should be aware that:

- isolation
- inappropriate use of humor
- depression
- difficulty eating/lost appetite
- irritability with family and friends
- inability to concentrate
- indecisiveness
- difficulty sleeping and nightmares

may be symptoms of emotional stress. It is the goal of the EMS Program to provide each student with the tools and resources to deal with emotional stress related to critical incidents.

RIDE-ALONGS
Students enrolled in the EMS Program may accept invitations to ride with EMS agencies as a citizen of the community. However, students will not be considered by ACC to be conducting a clinical rotation and are not permitted to wear an ACC clinical uniform or represent ACC in any fashion.

Violations of this policy may result in the immediate removal of the student from further clinical rotations, which would prevent the student from completing the EMT program.

SCHOOL CANCELLATION / INCLEMENT WEATHER

The EMS Program will follow all college policies for closing during inclement weather. Students will be informed of college closure through the regular television and radio media. DO NOT call the EMS Program about issues of school closure.

During times of official college closure due to inclement weather, students will be excused from clinical rotations and will not be penalized for the necessary reschedules. Campus closure due to water or electrical issue will NOT excuse the student from attending off-campus events.

SCHOLASTIC DISHONESTY

At Accordance Community College, scholastic dishonesty is unacceptable and is not tolerated. Any person who is a party to scholastic dishonesty as defined below will be disciplined as prescribed in this document.

SCHOLASTIC DISHONESTY is defined as misconduct including, but not limited to, plagiarism, cheating, and collusion.

- **PLAGIARISM** is defined as presenting as one’s own the ideas or writings of another without acknowledging or documenting the source(s). Students are guilty of plagiarism when they do any of the following in an essay or presentation:
  - Copy a word or words directly from a book, periodical, or electronic source without using quotation marks and references to sources;
  - Summarize or paraphrase the ideas or opinions of an author or use the data collected by an author without citing the author as the source;
  - Submit papers or projects which do not reflect their own knowledge, voice, and style, usually as a result of having had another person (1) write, (2) rephrase, (3) rewrite, or (4) complete their ideas;
  - Submit a paper or project which was written or prepared by another person for another class or another instructor implying that the work is their original composition or project;
  - Submit a paper or project which was previously submitted to fulfill requirements for another course, unless (1) the professor permits students to draw from earlier papers/projects or (2) the professors of concurrent courses (i.e. Common Ground courses) permit students to submit a paper/project to fulfill requirements in both courses;
  - Download a paper or portions of text from an electronic source and (1) paste it into a paper, (2) retype the paper or portions of the paper and submit it as their own composition, (3) retype phrases or sentences with a few changes, and submit the paper as their own composition, or (4) summarize or paraphrase the ideas from one or more sentences, without citing the source.
  - Submit as their own work a paper (or parts of a paper) purchased from a company or electronic source that offers catalogs of essays on different topics and/or for different courses.
• **CHEATING** is defined as intentionally using or attempting to use unauthorized sources in exams or on other scholastic projects, as well as failing to follow instructions in such activities. Students are guilty of cheating when they do any of the following:
  - Copy answers from another student’s examination answer sheet;
  - Use or attempt to use unauthorized materials (notes, study guides, “crib” sheets, textbooks, electronic devices, etc.) during an examination;
  - Exchange forms of a test with a classmate (i.e. exchange Form A for Form B);
  - Possess and/or use unauthorized copies of tests or answer sheets;
  - Change answers or grades on a graded project.

• **COLLUSION** is defined as intentionally aiding or attempting to aid another in an act of scholastic dishonesty. Students are guilty of collusion when they do any of the following:
  - Provide a complete paper or project to another student;
  - Provide an inappropriate level of assistance to another student in the form of (1) writing, (2) rephrasing, (3) rewriting, or (4) completing the paper or project;
  - Communicate answers to a classmate during an examination;
  - Remove tests or answer sheets from the testing site;
  - Knowingly allow a classmate to copy answers from his/her examination paper;
  - Exchange forms of a test with a classmate (i.e. exchange Form A for Form B).

**Instructional and Administrative Response to Scholastic Dishonesty**

Actions taken by individual instructors in response to a case of scholastic dishonesty by students may include one or more of the following:

- Assigning a zero for the paper, project, exercise, or test;
- Requiring the student to resubmit another paper, project, or exercise or to retake the test;
- In cases of serious or repeated scholastic dishonesty offenses, the student may be referred to the dean of student development and educational services or his or her designated representative for disciplinary review subject to possible disciplinary action as listed in the Accordance Community College Student Handbook under section titled “Disciplinary Procedure.”
- The College may initiate disciplinary proceedings against a student accused of scholastic dishonesty. “Scholastic dishonesty” includes but is not limited to cheating on a test, plagiarism, and collusion.

Additionally, the EMS Program may elect to report the incident of Scholastic dishonesty to the Department of State Health Services for consideration of decertification under EMS Rule §157.36 (b) 17 and 18.

**STUDENT GUIDEBOOK**

ACC publishes a Student Guidebook which addresses many concerns about policies and procedures of the College. Copies of this Guidebook are available from Student Services located in the Student Union Building. It is highly recommended that all students obtain and read through this booklet.

The Student Guidebook contains information on:

- Handling Grievances
- Health Services
- Helpful Phone Numbers
- Hours of Operation
- Parking
- Public Safety
- Refunds
- School Cancellation
ACC EMS Program Policies and Procedures

- Student Activities
- Student Services

Other important policies and procedures are also included.

SUBSTANCE ABUSE, INTOXICATION, AND IMPAIRMENT BY MEDICATION

The EMS Program requires that students remain drug-free while on campus or clinical rotations. Manufacture, sale, distribution, dispensation, possession, or use of alcohol, controlled substances, intoxicants, or by abusing or overdosing prescription or non-prescription over the counter medications, by program students on campus, at program functions, clinical rotations, or while conducting business related to the EMS Program are prohibited except as permitted by law or Accordance Community College District policy. Students violating these policies are subject to disciplinary action, which may include removal from the program, referral to the Department of State Health Services for suspension or decertification, and/or referral for criminal prosecution.

Students suspected of impairment by illegal or legal medications will be evaluated by the college police department and by EMS Program personnel. Students who are deemed impaired by intoxication from any substance will face disciplinary action up to and including criminal arrest for public intoxication.

Students who approach EMS Program personnel to admit to a problem with substance abuse will be referred to student health services for follow-up and assistance. Continuation in the program will be determined by the amount of assistance required. Students who cannot complete the enrolled semester will be given full rights to re-enroll following the Returning Students Policy. Students who are found to violate this policy without asking for assistance before the problem is discovered will be given no consideration for recovery or reentry into the program.

THREAT ADVISORY

If you receive word, through any legitimate means that our Nations Threat Advisory, issued by the Department of Homeland Security, goes to RED (severe), DO NOT GO TO CLINICAL ROTATIONS. Students may be asked to leave clinical rotations if the threat level is raised during the shift.

This policy will be in effect as long as the Threat Advisor remains on RED or until informed otherwise by your instructor.

Please understand this is a serious time of our nation, and that our local EMS providers, hospitals and fire departments will be on an extremely high level of alert. This policy is important for the security of these clinical sites and for student safety.

UNIFORMS

Students of EMT and paramedic programs are required to attend clinical rotations as a part of each specific program. Several of the sites in which clinicals are performed have strict policies regarding personal appearance and hygiene. In order to conform to these policies and the Code of Conduct for students enrolled in Health Science programs at Accordance Community College, the following Uniform Policy will be followed at all times while on clinical rotations.

Clinical Uniform - Class A: To be worn on all clinical rotations.

- White Uniform Shirt - pocket flaps and epaulets are mandatory, short sleeve only. The ACC EMS Program patch is to be worn on the left sleeve, placed on center of sleeve with top of patch one (1) inch below top seam. An appropriate TDSHS certification patch on right sleeve,
placed on center of sleeve with top of patch one (1) inch below top seam. No other patches or pins are permitted.

- **White Crew-Neck Tee Shirt** - required under the uniform on all rotations, plain white without designs or statements. A white long sleeve shirt or white turtleneck may be worn under the uniform shirt in cooler weather.
- **Navy Blue Uniform Pants** - Dicky’s model 874, Navy work pant OR RedKap model PT10 NV3. NO OTHER pant is acceptable.
- **Black Boots or Shoes** - leather tennis or coaching shoes, plain toed boot or shoe.
- **Black Belt** - plain leather without excessive tooling, plain silver buckle or Hook/loop fastener. If a holster is worn it must be black leather and carry no more than three items (suggest scissors, penlight, and clamp).
- **Bras** - required at all times for female students.
- **Socks** - required, must be black if visible.
- **Glasses** - no fluorescent colored eye wear.

It is recommended that each student have a second uniform with them on clinical rotations for use in the event the first uniform gets soiled or contaminated by blood or other body fluids.

**Class Uniform** - Class B: To be worn during class*. **Required, No Exceptions.**

- **Shirt:**
  - Paramedic Students: Red pique polo shirt, with NO patches.
  - EMT Students: Royal blue pique polo shirt, with NO patches.
  - Shirt must be tucked in at all times. Buttoned to second from top button. Program patches ARE NOT permitted to be sewn on these shirts.
- **Pants:** Standard uniform pants as described above.
- **Shoes:** Standard uniform boot or shoe, as described above.

* Full, time paid members of a fire department or EMS provider, coming to class on shift, may wear their standard duty uniform in lieu of the ACC Program Uniform, provided they wear the uniform in its entirety, and in a manner that represents the EMS Program and employer.

**Program ID**

Once issued, the program ID is to be worn by all students while actively participating in EMS Program activities.

- During clinical rotations, students must wear the ID with the picture visible attached to the left shirt pocket / pocket flap.
- On campus, students must wear the ID with the picture visible attached to the left collar.

The picture ID is the property of the ACC EMS Program and must be surrendered upon request. Program faculty may confiscate the program ID for violations of the uniform policy both in class or on campus, for violations of the professionalism policy, or for other issues related to ethical or moral behavior. Students are not to participate in clinical rotations while the program ID is in the possession of the Program. The EMS Program will return the program ID to the student following:

- Formal written request from the student detailing what actions will be taken to correct the issues which led to the confiscation of the ID.
- Formal request from the department / agency training officer, in cases in which the student is sponsored by a fire department or EMS agency.
- Full investigation for issues related to ethical or moral behavior.

**Grooming / Hygiene**

To be followed on clinical Rotations and in class.

- Hair must be clean, neatly groomed and of a natural color. Length must not fall below the bottom of the collar while standing. Female students are permitted to wear their hair up. The hair style must be such that remains neat and professional through out the clinical rotation, and one which does not draw unnecessary attention.
- Beards of any kind are **NOT PERMITTED**. Mustaches must be neatly cleaned and must not fall over the upper lip, sides cannot extend more than 3/4 inch past the corner of the mouth nor drop more than 1/4 inch below the corner of the mouth. Sideburns must be neatly trimmed and groomed, cannot extend more that ½ inch below the auditory canal.
• Perfume or aftershave are not allowed. Use of deodorant and breath fresheners are highly recommended. Makeup, if worn, should be subtle.
• Smoking or other use of tobacco products, while in public, is strictly prohibited while in the classroom or clinical uniform.
• The EMS Program reserves the right to remove students from the classroom or clinical site for poor hygiene. This includes strong body or breath odors, including and especially tobacco, failure to shave, and unkempt hair.

Jewelry and Bodily Decoration
• NO jewelry may be worn at any time during clinical rotations with the following exceptions:
  o Watches, wedding bands (not diamonds), approved necklaces (must be worn inside shirt), and Medic Alert Bracelets.
• Visible body piercing is NOT permitted.
• Female students may wear ONE stud earring per ear. Dangling or hoop earrings are not permitted.
• Tongue studs are not permitted.
• Visible Tattoos are NOT permitted.
• All tattoos must be covered by either clothing, bandages or smudge resistant make-up. Long sleeve shirts may be worn to cover tattoos on the arms. Turtle neck shirts may be worn to cover tattoos on the neck. Each tattoo must be covered completely at ALL TIMES. “Peaking” of tattoos below the short sleeve line is not permitted.

Medical Equipment
Each student must have a personal stethoscope, pen light, watch with a second hand, and safety eye wear for each clinical rotation.

Cold or Wet Weather
• Jackets worn should be navy blue if possible. If a navy blue uniform jacket is not available, any jacket or coat which is free of patches is permitted. A white long sleeve shirt or white turtleneck may be worn under the uniform shirt in cooler weather. Sweaters are not permitted.
• Hats are not permitted at any time other than conditions of extreme weather and designed for protection from heat loss. Ball caps are not permitted.
• Rain coats should be plain, without designs or statements. Scotchlite® strips are recommended.
• Umbrellas are not to be used on clinical rotations.

Guns
Guns are not allowed on clinical rotations. Police departments which require officers to carry a gun at all times must obtain permission from each clinical site prior to the rotation.

Wearing the Uniform
Students are to abide by the following guidelines when dressed in either EMS Program uniform.
• While dressed in the uniform and in the public view; whether on a clinical rotation, in school, before or after class or before or after a clinical rotation; all policies regarding the wearing of the uniform will be followed.
• The uniform is not to be worn in public venues, in other than in an official capacity.
  o At no time should the uniform be worn where alcohol is served or consumed, other than while on a call during a clinical rotation.
• The Clinical uniform is highly recognizable in all settings. At all times while in the public view:
  o Students are to wear the uniform with the shirt properly buttoned and tucked.
  o Boots are to be properly laced or zipped.
  o Hats are not permitted at any time other than cold weather and must follow the cold weather policy.
  o Students are to be clean and neatly shaved at the beginning of each shift.
• The Classroom uniform is highly recognizable on campus. While on campus* it is required that:
  o Shirts are properly buttoned and tucked.
Boots are to be proper laced or zipped.
- Hats are not permitted at any time other than cold weather and must follow the cold weather policy.
- Students are to be clean and neatly shaved upon arrival on campus.
- Uniforms are to be worn from the moment the student is in the public view.
  - Campus means the Northeast Campus or whichever campus or location which hosts the class.
  - Students may wear the uniform to restaurants for meals while in class or on clinical rotations permitted they show professionalism and represent the program and EMS at the highest level.

**Failure to Follow the Uniform Policy**

Students are to report to the clinical site dressed completely in the clinical uniform. Students who are found on a clinical rotation out of the proper uniform will be asked to leave the clinical site. All hours completed prior to leaving the rotation, including hours from previous clinical experiences, will not count toward the minimum requirement. Students who are reported by clinical sites or other third parties, to have been out of the proper uniform must repeat the entire rotation before credit is received.

The clinical uniform is graded through the clinical section of the program. Students who fail to represent the EMS Program in a positive light through unethical, immoral, or illegal actions while dressed in either the Class A or Class B uniform WILL receive a failing grade for the clinical section, thus preventing the student from completing the program.

**WITHDRAWING FROM THE PROGRAM / RETURNING STUDENTS**

Students leaving the program are advised to contact their instructor or the Program Director for an exit interview prior to withdrawing or immediately after receiving a failing grade. The exit interview will establish requirements for returning to the program at a later date. Regardless of whether or not an exit interview is conducted, to be dropped from the program the students must officially drop the program through the Registrar’s Office. Failure to officially drop the course WILL result in the student receiving a grade of “F” in ALL EMSP COURSES in which the student is enrolled for the effected semester. ONLY the student can drop a class. Instructors CANNOT drop a student.

**General Guidelines for Readmission / Reapplication:**

- Any student who does not successfully complete all classes in the first semester must reapply for the entire program. No special considerations can or will be made.
- Students who do not complete an exit interview must reapply to the program from the beginning, regardless of the students last successful semester. No special considerations can or will be made.
- Any student who does not successfully complete any part of the required classes in any semester will be dropped from the entire program. That student may reapply to the program and if selected, may be allowed to repeat the failed class and continue on through the program without having to repeat classes which have already been passed. The decision and determination of repeating classes will be the responsibility of the course instructor and the Program Director, and will be based on the elapsed time from the unsuccessful semester to returning to the program. If the elapsed time is over 13 months, the student must repeat all classes in the program, and must reapply to the paramedic program as a new student.
- Students who are able to finish the didactic or clinical portion of the program but are unable to finish the other, must complete both components upon re-enrolling.
- Students who re-enroll must repeat all aspects of the course. No credit will be given for previously passed examinations, didactic or practical.

**Reentry into the Paramedic and other Health Science Programs**

The Health Science Department has a two attempt policy. This policy limits the number of times an individual may enroll and re-enroll into any Health Science program to two (2) attempts. This applies to returning Paramedic Students and applies when an applicant applies to different Health Science
programs. In short, any student may apply to the paramedic program and if necessary re-apply one time, or may apply to the paramedic program once and to any other health science program once.

WORKING WHILE ENROLLED

The EMS Program places no restrictions on a student’s ability to work a full-time job while enrolled in the program. Students are strongly cautioned not to work over-time, additional part-time jobs, or anything other than minimal involvement with volunteer agencies. Excess responsibilities will greatly detract from the time needed to study and learn.