

This sample document is provided as an example for reference as a “typical” syllabus.

Accordance Community College (ACC) Emergency Medical Services Training Programs SUMMER 2018

Catalog Description: EMSP 2261 EMT-P Clinical Practicum II (Credit 2 sem. Hr, Lab 9)

Prerequisite: EMSP 2434 + State of XX Office of EMS Basic Certification
Documentation of 12th Grade Reading Level or ASSET or Compass Reading level, HS transcripts or copy of diploma or GED scores, CPR Completion: (AHA - Health Care Provider, ARC - Professional Rescuer), all Immunizations, background check, drug screen, physical exam are required for admission to the ACC EMSP

STUDENT MUST COMPLETE THIS COURSE BEFORE STARTING EMSP 2330

- **ALL CLINICAL ROTATIONS / COMMUNITY SERVICE MUST BE DONE PRIOR TO DAY 1 OF EMSP 2430**
- **ALL CLINICAL PAPERWORK MUST CORRESPOND TO THE CLINICAL COURSE AND BE COMPLETELY FILLED OUT WITH APPROPRIATE PRECEPTOR SIGNATURES.**
 - If the above has not been accomplished on day 1 of EMSP 2430 the student will be dismissed until requirements are met. Student must refer to missed class time in the EMSP 2430 syllabus for what needs to be done for time missed while completing EMSP 2261. Student can only miss 10% of EMSP 2430.

Course Description:

This course provides clinical field training to assess and manage patients with medical conditions. The student will also be clinical / field trained on managing the pediatric, geriatric, psychiatric, OB / Gyn patient and community service. The student will be expected to apply the pathophysiological lessons learned to actual patients in the clinical settings.

Minimum expectations

“To prepare competent entry level Emergency Medical Technician-Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains with or without exit points at the Emergency Medical Technician-Intermediate, and/or Emergency Medical Technician-Basic, and/or First Responder levels.”

Student Learning Outcomes:

- Routinely perform history and comprehensive physical exam to enable treatment plans
- Practices interpersonal and team work skills.

Purpose and Rationale:

This practicum course provides clinical and skills practice/verification for the Emergency Medical Technician (EMT) to advance his/her training to the paramedic level. The training includes instruction on practical and clinical skills used for management of medical and special population patients.

“At ACC the safety of our students, staff, and faculty is our first priority. As of August 1, 2017, Accordance Community College is subject to the Campus Carry Law (SB13 2018). For more information, visit the ACC Campus Carry web page at <http://www.accs.edu/district/departments/police/campus-carry/>.”

PORTFOLIO: Every paramedic student must complete the program-required portfolio of skills and patient care experiences prior to graduation. Each of the relevant skills and patient care encounters must be documented throughout the program. Students are encouraged to always be vigilant in pursuing opportunities for skills and patient care experiences to achieve their totals. No student will be allowed to graduate who has not completed 100% of their portfolio.

SCANS Competencies and Foundations

Resources: Identifies, organizes, plans, and allocates resources.

- **C1 Time:** Selects goal-relevant activities, ranks them, allocates time, and prepares and follows schedules.

Information: Acquires and uses information.

- **C8 Uses computers** to process information

Interpersonal: Works with others.

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- **C9** Participates as a member of a team: Contributes to group effort.
- **C13** Negotiates: Works toward agreements involving exchange of resources; resolves divergent interests.
- **C14** Works With Diversity: Works well with men and women from diverse backgrounds

Technology: Works with a variety of technologies.

- **C20** Maintains and Troubleshoots Equipment: Prevents, identifies, or solves problems with equipment, including computers and other technologies

Basic Skills: Reads, writes, performs arithmetic and mathematical operations, listens, and speaks.

- **F2** Writing: Communicates thoughts, ideas, information, and messages in writing; creates documents such as letters, directions, manuals, reports, graphs, and flow charts.

Thinking Skills: Thinks creatively, makes decisions, solves problems, visualizes, knows how to learn and reasons

- **F9** Problem Solving: Recognizes problems and devises and implements plan of action.

Personal Qualities: Displays responsibility, self-esteem, sociability, self-management, integrity, and honesty.

- **F15** Sociability: Demonstrates understanding, friendliness, adaptability, empathy, and politeness in group settings.
- **F16** Self-Management: Assesses self accurately, sets personal goals, monitors progress, and exhibits self-control.
- **F17** Integrity/Honesty: Chooses ethical courses of action.

Disability Placards

If student has a disability that requires a placard to park in handicap space he / she will have to have ACC paperwork completed by physician that clears student to be able to do the skills needed to pass the course and do clinical rotations.

- If cleared for clinical student will not park in handicap space at clinical sites.
 - If this occurs student will be dismissed from the clinical rotation and will have to meet with PD and instructor. Student may or may not continue in the clinical course. If dismissed student will receive a failing grade.
- This is to protect the college and the student from a future problem.

Scholastic Dishonesty

If student is caught cheating, in any capacity, student will be exited from the program – receive a failing grade – and not be welcomed back to the ACC EMS program.

- This does not deny the student the chance to obtain certification as there are other EMS programs offered in or around the City of Accordance.

Clinical/Ambulance Affiliations:

Area objectives and individual affiliation directives will be discussed as part of the clinical orientation. The clinical practicum (depending on availability) will consist of:

- Hospital
- Field Internship
- Community Service

CLINICAL ASSIGNMENTS

- ACC Students will not be used as staff while performing clinical rotations. To ensure this does not occur students working for a service will not ride with said service as part of his or her clinical rotations.
- During clinical orientation the student MUST let Individual's Name ACC Clinical Coordinator, know if assigned with a service in which employed is / are on the student's clinical schedule so he / she can be rescheduled with a different service.
- This will allow for objective evaluation and avoid the possibility of the student being used as “staff”.
- If student does not self-report student will be removed from the clinical setting and have to meet with Program Director and Clinical Coordinator about continuance in the clinical course

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SCOPE OF PRACTICE – FOR CLINICAL ROTATIONS

- The Scope of Practice the student will work under while in the clinical setting comes from the National Highway Traffic Safety Administration - National Emergency Medical Services Education Standards. The Medical Director has reviewed and approved the educational content of the program curriculum for appropriateness and medical accuracy.
- EMS practice is delegated so while in the clinical setting patient care will be performed using the ACC Medical Director's license. Student will take a "skills verification form" to each clinical rotation. Listed on the form is the student's Scope of Practice covered by the ACC MD license.
- Student needs to understand he / she can only perform skills and deliver medications listed on the skills verification form. If the service protocols are outside of the student's scope the student should NOT perform the skill or deliver the medication. Student is practicing under the license of the ACC MD and not the MD of the service you are doing a clinical rotation.
- Stepping outside your Scope of Practice could lead to dismissal from the program.

Exception: ICU rotations ONLY–

When with an RN in these units if given an option to deliver a medication that is outside your ACC scope, it is acceptable to do so.

- Once medication is delivered obtain information about the drug – MOA / indication on why given to that patient – and include information on your PCR.

Clinical assignments will be limited to 24 – 30 hours per week – 2 – 3 days per week

- This will be done to ensure student has to time document and turn in clinical coursework as required so student can meet required deadlines and continue in the program.

Time off during clinical courses

- Vacation and time off should not be scheduled during clinical coursework. This will allow the student to meet the requirement of course hour rotations per week.
- Clinical coursework is part of the program it is not considered “down time”. During paramedic rotations students are expected to prepare for upcoming coursework that follow clinical rotations during this time period.

ACC Clinical Preceptor Course Paperwork: Ambulance rotations

- Paperwork that has been explained in depth to the student in the clinical orientation and **MUST be taken to EACH Ambulance Rotation**
- Student needs to:
 - **ENSURE** the preceptor – at the beginning of the shift – understands he / she needs to read the complete document.
 - **ENSURE** the preceptor understands he / she needs to sign the signature page then - fax or scan and email or take a picture and text to Clinical Coordinator, Individual's Name – at the beginning of the shift.
- **If this does not occur the clinical shift will not count and a subsequent rotation will need to be lined up with Individual's Name so course completion can be obtained.**
- **IF told by the preceptor he / she has already completed this requirement – contact Individual's Name so she can ensure a signature form is in her possession.**

EMS UNIFORM: Student will:

- Show up at the clinical site in FULL uniform and remain in FULL uniform throughout the rotation. Student will also be groomed as cited in the Code of Conduct – NO EXCEPTIONS
 - If this does not occur student will face a reprimand
 - If this occurs on numerous occasions student may / will be removed from the program – this will be decided after a meeting with the clinical coordinator and the program director.
- Student does NOT work for the affiliate – You are an ACC student and need to present yourself as such at all times.

Physician – Student Rotation

- Student needs to go to the XX TMC ED Triage desk and ask for Dr. Individual’s Name. The phone to the ED is XX if student is lost once at facility. Student needs to arrive at least 10 minutes early to participate with ‘check out.

Hospital Rotations with RN preceptor – no ACC preceptor

Student will:

1. Stay with assigned preceptor for the complete rotation – WILL NOT – “freelance” in the unit.
2. Break for lunch when the preceptor breaks and return at the same time
3. Complete paperwork in the Unit where rotating – NOT - elsewhere in the hospital.
 - RN preceptor will direct you to the acceptable area
4. Paperwork will be done the last hour of the shift and then signed by the preceptor.
5. You are NOT to leave the rotation until time is completed even if directed to do so by RN preceptor
 - If this happens contact Individual’s Name – BEFORE – you leave the site or you will be considered Absent Without Leave (AWOL).

Course Textbooks: Required / Recommended

Required Texts: Nancy Caroline Emergency Care in the Street – 8th Edition
Recommended: JB Test Prep: Paramedic Success and / or www.emt-national-training.com

Grading Scale:

90-100	A	4 Points
80- 89	B	3 Points
75- 79	C	2 Points
Below 75	F	0 Points

Clinical grade

Clinical online tests	10%
Simulation Lab	10%
PCR – Complete Data	10%
PCR – Assessment / Evaluation	50%

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Preceptor Evaluation	5%
Clinical Worksheet - Completeness	15%

Grade Criteria includes:

Clinical online tests = 10%.

- Students should want to pass each test with a 75% or better as these are part of your clinical grade. If not achieved student should go back and review information not known as it is your responsibility to prepare for upcoming HESI final and NREMT certifying exam.

Simulation Lab Rotation = 10%

- **Date set on clinical schedule will NOT be changed. It is mandatory student attends on that date.**
 1. **If said lab is missed and another is not available during your clinical course an “incomplete” will be given for the course. Student will need to contact Individual’s Name so see when next course is available to complete clinical rotations.**
 2. **Student will not be able to move on to the next didactic course.**

Course objectives:

Discuss proper use of airway drugs for Rapid Sequence Intubation***
Demonstrate how to perform Rapid Sequence Intubation***
Discuss how 12-lead monitoring can aid in patient care

- RSI and Advanced 12-Lead education = 100%
 1. RSI procedure via skill sheet
 2. RSI worksheet on medications
 3. Advanced 12-lead worksheet
- Students will be expected to come to class prepared by:
 - Reviewing skill sheet so knowledge of procedure can be shown
 - Completing and reviewing the RSI medication worksheet.
 - Completing and reviewing 12-lead worksheet
- If not prepared student will be dismissed for the day – NO “make-up” sessions
 - Student will receive a “0” as a grade
- As this is a part of the clinical coursework students will be expected to:
 - Display ability to perform RSI skill and deliver RSI drug doses needed for procedure
 - Display knowledge of the advanced 12-lead information
 - Complete Simulation Lab Evaluation form – Assessed by Preceptor
 - Track the skills performed on **XX** tracking program

Clinical/Field Documentation Completeness / Neatness = 60%

1. Student Clinical Data information (name, date, right form (ambulance, day, hospital) etc.) is completely filled-in (10%)
2. Patient Assessment/Evaluation Completeness (50%)

Minimum Criteria:

- a. Patient Chief Complaint / General Impression
- b. History & Physical Exam/assessment
- c. Vital Signs
- d. Treatment
- e. Disposition

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Clinical/Field Preceptor Evaluations = 5%

1. Clinical (hospital and ambulance) Preceptor Evaluation Form (5%)
 - a. Rating Scale –
Score student receives (by adding the points given by preceptor on each forms) ÷ Maximum points available = rating score

- Students will **NOT** guide, lead or give suggestions on how his / her preceptor scores the evaluation. If this occurs the student’s clinical rotations will stop and he / she will meet faculty / Program Director. A decision will be made about continuation of said student with his / her clinical coursework. If student is not cleared to continue student will fail the clinical course.

Clinical Worksheet Completeness

- a. Complete (15%)
- b. Incomplete (0%)

- **XX Tracking Program PCR'S**
 - Need to be completed on all patient’s assessed **then printed (downloaded) for ACC notebook**
 - PCRs should be completed within 24 hours of completed rotation.
- **DOCUMENTS TURNED IN WEEKLY – placed in clinical notebook kept at the ACC campus**
 - **XX Tracking Program – PCRs** – completed in XX Tracking Program – need to be downloaded and put in clinical notebook at ACC
 - **PRECEPTOR EVALUATION**
 - Field / hospital internship shift evaluation worksheet (preceptor evaluation)
 - **STUDENT EVALUATIONS:**
 - Hospital / EMS rotations
- Student **MUST** time stamp each document, using the machine at the ACC campus, **prior** to placing in clinical notebook showing proof this occurred as required.
 - **IF THIS IS NOT DONE 5 POINTS WILL BE DEDUCTED FOR THE PAPERWORK AND REFLECT ON OVERALL GRADE**
- **IF PAPERWORK IS NOT TURNED IN EACH WEEK = 5 POINTS WILL BE DEDUCTED AT THE END OF SAID WEEK (DUE TO NON-ACTION BY THE STUDENT) AND REFLECT ON THE STUDENT’S OVERALL CLINICAL GRADE.**
- Documents turned in Incomplete will result in 5 points being deducted for said week.
 - Student needs to review all documents to ensure they are completed **prior** to placing in notebook for grading.
 - As these are legal documents student needs to show he or she is capable performing this process.
- **Non-compliance** – will occur if student does not turn paperwork over a 2 week period.
 - This will result in suspension from clinical rotations.
 - The student will have to meet with instructor (s) and PD to review the situation and determine if the student resumes clinical rotations. If rotations are not resumed student will be exited from the program and receive a failing grade.

Clinical PCR Goals - Patient Contacts for XX Tracking Program – minimum numbers for each area - you should strive for more

These clinical/field evaluations may result in a conference to discuss the student's progress. The grade for EMSP 2261 consists, but is not limited to the following:

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a. Written Patient Assessments - PCR's

Students should be document via XX Tracking Program - **ALL patients assessed** in each clinical / ambulance area via XX Tracking Program **within 24 hours of shift completion**

Emergency Room – PCR's on patient ages listed below – MINIMUM - 10 PCR's

Each student must make and document the following contacts in the Emergency setting.

1. 4 Adult patients
2. 4 Geriatric patients
3. 2 pediatric patients in each pediatric age subgroup.

Psychiatric and Sobriety house - 6 PCR's / per rotation – MINIMUM

ICU, Burn and Labor and Delivery – PCR on all patient's contacts - in each area

Operating Room – PCR on all patient's in which you place an advanced airway.

- Document these contacts the same as you do in the skills lab. Type of airway, any suctioning, EtCO₂, and ventilations of said tube.
- If you get vitals document this also
- **TRACKED ONLY AS A SKILL**

These patient documentations will be evaluated based on the program patient assessment template provided the student.

b. Ambulance CAPSTONE Field Internship Evaluation:

- Write up all patients which you perform an assessment (whether you transport or not).
- Student performance will be evaluated / scored by the field evaluators and the final grade will be assessed by the Clinical Coordinator and/or Primary Faculty.

c. Affective Evaluation:

The student's appearance, attitude, promptness, professionalism (see evaluation form) will be assessed by the clinical preceptor and Clinical Coordinator/Primary Faculty.

Tracking Patient Contact Minimums – Needed for Graduation

- Students MUST track all requirements honestly. These will be tracked via XX Tracking Program PCR's.
- Non-honest tracking will be seen as scholastic dishonesty and student will be dismissed from the program

Weighted Grade Calculation:

A clinical grade will be determined from clinical evaluations. The grade will be calculated on the following scale:

Cognitive **XX%**
Psychomotor **XX%**
Affective **XX%**

If at any time a student's performance/attitude should jeopardize a clinical /ambulance affiliation or the well-being of a patient, the student will be removed from the setting (hospital or ambulance) by the preceptor or instructor. A decision regarding whether or not the student will be allowed back into the clinical setting will be determined by the EMS Clinical Coordinator and the EMS PD.

Community Service – (16) hours must be completed prior to the end of this course

- **Site needs to be cleared by XX Faculty Member**
- **Find opportunities at – <http://www.volunteeraccordance.org/>**

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Parking:

Students will be responsible for all expenses incurred during clinical rotation. **ACC will not reimburse the student.**

EMSP 2261: - Paramedic Clinical/Ambulance Assignments:

EMS students must maintain a 2.0 GPA in all EMS courses to be eligible for enrollment for future courses. Students must attend the clinical orientation and show proof of registration at the Orientation. Student must attend the orientation in full EMS uniform with stethoscope and goggles.

- Clinical/Field training will be provided to the student based on availability. Students are expected to attend and successfully complete all scheduled clinical assignments. Immunization records must be current throughout the program, and will be maintained in the student file. Students will not be permitted in the clinical setting if immunization records are delinquent. All clinical scheduling will be done through the ACC EMS office. Any rotations attended without the permission of the ACC EMS Clinical Coordinator will not be accepted. Preceptor evaluation and specific clinical grading will be reviewed at the clinical orientation. Students not attending the clinical orientation will not be permitted in the clinical setting. If a student does not go to an assigned clinical rotation and / or leaves the clinical site prior to completion of the rotation and does not contact the clinical coordinator he / she will be considered Absent without Leave (AWOL) and may be dismissed from the program immediately pending Lead instructor and Program Director decision.

Clinical Coordinator / contact number for emergencies or problems that arise prior to or during a clinical rotation:

Individual's Name [XX Contact Number]

Student will NOT contact ANYONE from XX EMS Agency for driving directions to an XX EMS Agency site. If this occurs you will be cancelled for the day by the XX EMS Agency personnel. If this occurs you MUST also contact Individual's Name ASAP.

Clinical preceptor

At the start time of your clinical rotation if the clinical preceptor is not on site contact Individual's Name @ [XX Contact Number]. You will be informed of what to do by Individual's Name

- **DO NOT contact the preceptor**
- **DO NOT begin your clinical rotation until the preceptor is on site.**

If rotation begins without clinical preceptor, the student will have all clinical rotations suspended immediately. A meeting with the PD and Lead Instructor will take place. Post meeting, a final determination will be made on continuance or not. If student is not allowed to continue, a failing grade will be given.

Where to meet your clinical (hospital) preceptors is posted on your JB site.

Attendance Policy:

Per the State of XX Office of EMS requirement the students must meet / attend all class / clinical hours to complete the program. If the student is absent or tardy they MUST contact their lead EMS Instructor for additional information on what options are needed to meet all DSHS requirements. Students must contact their EMS Instructor as soon as possible when they are going to be absent or tardy. Any student that is Absence Without Leave (AWOL) will be dismissed from the program pending Lead instructor and Department Program Director's decision.

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If time missed is due to:

- **Medical illness - the department will require a signed physician clearance to reenter clinical rotations**
- **Injury - student will need to get document from program – for physician to clear students to come back to class without restrictions to reenter clinical rotations**

If out sick or injured student cannot continue on in clinical until you get a physician release to the clinical coordinator, Individual's Name, which clears you to return. If you do any rotations without being cleared you will meet with the Program Director and faculty to evaluate continuance in the program. If you do continue any rotations done without clearance will be considered null and void and will need to be rescheduled. A deadline will be given for this to be completed. If deadline is not met the student will fail the clinical course.

Clinical/Field training will be provided to students based on availability. **Students are expected to attend all scheduled clinical assignments and complete all hours assigned (student cannot leave early).** Any problems must be reported to the Clinical Coordinator using the clinical number provided on the student schedule. **All clinical hours must be complete with Preceptor signatures to satisfy State of XX Office of EMS requirements.**

Missed Class (clinical) Time Policy: Clinical Assignment violation:

The following is the ACC policy for any student that misses a clinical rotation.

1st time the student's clinical grade will be dropped one letter

2nd time the student will fail the course (student will need to drop any other classes that are running concurrently in which they have not received a final grade).

Time missed by the student can place our clinical affiliation agreements in jeopardy. The EMS program cannot operate without the affiliations so the policy above has been put in place to assure loss of affiliates does not occur.

Students that miss a clinical rotation will have to do the following to complete his / her clinical rotations:

1. Pay \$30.00 / hour for a 1:1 clinical make-up rotation
2. Inform Individual's Name of your available dates to get this accomplished.

After an assessment of the clinical site and preceptor availability Individual's Name will let you know your options.

Understand that:

1. If Individual's Name does not have an available site or preceptor with the dates you supply her with she will let you know so you can give her additional dates.
2. You may not finish your clinical course on time,
3. You may not be eligible to continue on to the next EMSP course in the program.
4. The missed time policy will be enforced.

Students that are failed due to time missed will have to re-register for a subsequent clinical(s) needed to complete their certificate.

Sleeping during ambulance rotations will **NOT** be tolerated. Student will be sent home by the preceptor (or other designee) with the service. This will be counted as missed time.

Electronic Devices (Pagers, Cell Phones, MP3, Lap top, etc...):

- **ALL ELECTRONIC DEVICES MUST BE TURNED OFF AT CLINICAL SITES**
- **IN ALL HOSPITAL SETTINGS ELECTRONIC DEVICES ARE NOT PERMITTED WHILE ON THE CLINICAL UNIT.**

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- When in the hospital setting inputting PCR information into XX Tracking Program – while on the clinical unit – is prohibited. If student is found doing this he / she will be dismissed from the clinical site. Student will need to meet with PD and course instructor. Post meeting a decision will be made on whether student continues in the course. If it is deemed that continuance does not occur student will receive a failing grade for the course and not continue in the program.

Inclement Weather:

If the training is occurring on an ACC campus, the ACC policy on inclement weather will determine when classes will be cancelled. In the clinical/field internship, students are encouraged to attend all rotations that the student can safely attend. If inclement weather prevents a student from attending a rotation, they will contact the clinical coordinator using the clinical contact number.

Patient Confidentiality:

Students are expected to protect patient confidentiality in all aspects of the clinical/field internship. Students are not to discuss patient information outside of the clinical facility and are not allowed to copy patient records to complete patient documentations for the program. Students will be under the direct supervision of hospital, field, or ACC preceptors and will follow their directives.

PHI (PERSONAL HEALTH INFORMATION)

- **THERE IS NO CIRCUMSTANCE THAT ANY OF THIS INFORMATION SHOULD BE CAPTURED ON AN ELECTRONIC DEVICE WHILE DOING CLINICAL OR EMS ROTATIONS.**
- **IF FOUND TO HAVE HAPPENED STUDENT WILL BE DISMISSED FROM THE PROGRAM AND RECEIVED A FAILING GRADE FOR THE COURSE.**

In regards to current concerns of Social Networking sites, including but not limited to Facebook, MySpace, Twitter, YouTube, the Student must NOT POST ANY PHOTOS, VIDEO'S, PATIENT INFORMATION OR ANY OTHER DATA REGARDING YOUR PATIENTS, OR AFFILIATIONS. The student must keep in mind everything taught to them in school in regards to moral and ethical behavior plus, federal laws regarding confidentiality.

HIPAA protected information and college policies regarding protection of privacy of the student's patients. Students who breach these policies will be exited from the Program.

Field/Clinical Problems or Emergencies:

Any problem or emergency that occurs during field/clinical training will be brought to the attention of the clinical coordinator within 24 hours. If the problem is of a very serious nature, the student should contact the Clinical Coordinator immediately. Based on an initial investigation, the student may continue to complete his/her training or the student may be temporarily suspended until a meeting can be arranged to discuss the results of the investigation.

Students are responsible for reading and adhering to the information presented in the ACC Student Handbook and ACC Catalog, available online at www.acc.edu/students.

In addition to the ACC policies regarding student conduct, while acting in the capacity as a health science student, safe patient care and ethical and professional behavior is essential.

Student Background:

While in the program the student needs to self-report to the ACC department and the State of XX Office of EMS within 2 business days of a change in his or her criminal history or being arrested, charged or indicted for any criminal offense which can or does result in him or her being convicted or placed on probation, parole, deferred adjudication community supervision,

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deferred disposition. Contact at the State of XX Office of EMS in Accordance – [XX Contact Number].

Alcohol / Illicit substance use:

At no time shall the student use alcohol / or illicit substances while in the ACC uniform. If a student is suspected of or found to be intoxicated the student will be removed from the program. The student will have to make an appointment with the Department Program Director to be eligible for re-entry into the program. The student will also be removed from the program if seen ingesting substances that resemble alcoholic beverages (virgin drinks, near beer, etc.) / illicit substances while in an ACC uniform. Refer to ACC Student Handbook.

Change in Health Status:

Students that develop a medical or physical problem that would keep him / her from performing the Job Essentials of the profession, as published by the State of XX Office of EMS, found on the ACC EMS website need to inform the program faculty or director immediately upon the change. To get to webpage go to [website location]

NOTICE:

Students who repeat a course for a third will face significant tuition/fee increases at ACC and other public colleges and universities. Please ask your instructor / counselor about opportunities for tutoring / other assistance prior to considering course withdrawal or if you are not receiving passing grades.

Code of Conduct violations:

If the Code of Conduct is violated the student will be dismissed from clinical rotations. The student must immediately contact the clinical coordinator or will be considered AWOL. Any ACC instructor or Clinical Affiliate is / are eligible to enforce the components of the Code and the student will abide by the discipline. Missed class time policy will be enforced.

Insubordination:

If a student disobeys an order from an ACC instructor / clinical preceptor student will be removed from the classroom or clinical setting. Said student will meet with the PD and may be removed from the program.

ACC EMS POST EXPOSURE PLAN

Students enrolled in the hospital or ambulance clinical rotations of ACC, who become exposed to any infectious organism(s) during the clinical rotation, shall adhere to the following guidelines

1. Notify the clinical preceptor immediately
2. If in the In-hospital settings (ER, ICU, L&D, OR, etc.), contact the Infectious Disease Officer on duty, and follow their instructions.
3. Pre-hospital (ambulance) rotations will notify the preceptor immediately, and then follow steps 4 & 5 respectively.
4. Notify personal Physician and follow their instructions.
5. Notify the Clinical Coordinator – **Name [XX Contact Number]** to fill out a Clinical Incident Report

Student issues:

The protocol for the college in regards to issues, complaints or clarifications that are directly related to the programs, courses, and classes, is for students to contact the instructor of their class first. If no resolution is

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reached, they are then to contact the Program Director of the department. Should the issue still not be resolved, they would then contact the Director of the PSI.

Grievances Regarding Policies and Procedures

Students who disagree with a policy, procedure, or rule may file a student grievance as permitted by ACC policy. The filing of a grievance, however, does not excuse compliance with current policies, procedures, and rules. Students shall comply with all policies, procedures, and rules until and if such policies, procedures, or rules are withdrawn or modified.

Students are responsible for reading and adhering to the information presented in the ACC Student Handbook and ACC Catalog, available online - [Accordancecc.edu](http://accordancecc.edu) - Click on – Information for - Click on – Students Click on – Student Code of Conduct and Student Handbook

Clinical Code of Conduct

A student shall:

1. Provide safe and professional patient/client care at all times and implement measures to promote a safe environment for each patient/client.
2. Comply with policies, procedures, and rules related to academic and clinical performance that are issued by XX EMS program by ACC, or by any clinical agency.
3. Not commit acts of omission or commission that cause or are likely to cause harm to patients/clients.
4. Not attempt care/activities without adequate orientation, theoretical preparation, assistance, or supervision.
5. Maintain patient/client confidentiality.
6. Take appropriate action to assure the safety of patients/clients, self, and others.
7. Provide care for the patient/client in a timely, compassionate, and professional manner.
8. Communicate with patient/client and healthcare team in a truthful, timely, and accurate manner.
9. Actively promote the highest level of moral and ethical principles, and accept responsibility for his/her actions.
10. Treat others with respect and promote an academic and clinical environment that respects human rights, values, and choice of cultural and spiritual beliefs.
11. Collaborate and cooperate in every reasonable manner with the academic faculty and clinical staff to assure the highest quality of patient/client care.
12. Abstain from the use of substances that impair judgment.
13. Report and document all patient/client assessments or observations, the care/ practice provided by the student for the patient/client, and the patient's/client's response to that care/practice.
14. Accurately and timely report to the appropriate practitioner errors in or deviations from the prescribed regimen of care/practice.
15. Not falsify any patient/client record or any other document prepared or utilized in the course of, or in conjunction with patient/client care/practice.
16. Delineate, establish, and maintain professional boundaries with each patient/ client. When providing direct patient/client care, the student shall provide privacy during treatment and care/practice and shall treat each patient/client with courtesy, respect, and with full recognition of dignity and individuality.
17. Not engage in behavior that causes or may cause physical, verbal, mental or emotional abuse to a patient/client; or engage in behavior toward patient/client that may reasonably be interpreted as physical, verbal, mental or emotional abuse.
18. Not misappropriate a patient/client's property or engage in behavior to seek or obtain personal gain at the patient's/client's expense; engage in behavior that may reasonably be interpreted as behavior to seek or obtain personal gain at the patient's/client's expense; engage in behavior that constitutes inappropriate involvement in or interference with the patient's/client's personal relationships; or engage in behavior that may reasonably be interpreted as inappropriate involvement in the patient's/client's personal relationships. For the purpose of this paragraph, the patient/client is always presumed incapable of giving free, full, or informed consent to the behaviors by the student set forth in this paragraph.
19. Not engage in sexual contact or romantic relationships with a patient/client; engage in conduct that may reasonably be interpreted as sexual or romantic; engage in any verbal behavior that is seductive or sexually demeaning to a patient/client; or engage in verbal behavior that may reasonably be interpreted as seductive or sexually demeaning to a patient/client. For the purpose of this paragraph, the patient/client is always presumed incapable of giving free, full, or informed consent to sexual or romantic activity with the student.

This sample document is provided as an example for reference as a “typical” syllabus.

Unsafe/Unprofessional Practice and Weak Practice with Potential for Unsafe and/or Unprofessional Practice

A student shall provide safe and professional patient/client care/practice at all times. Unsafe care/practice, unprofessional care/practice, or weak care/practice with potential for unsafe and/or unprofessional care/practice occurs when the student's behavior in providing care/practice to patients/clients may call into question the student's professional judgment and accountability and may violate the current:

- Standards of care/practice in Emergency Medical Services; or
- State Emergency Medical Services Act; or
- Code of ethics for Emergency Medical Technician; or
- ACC and/or clinical agency policies and procedures; or
- Emergency Medical Services program goals and/or course objectives.

Depending upon the degree of actual or potential harm a patient/client may suffer, a student's one-time deviation from safe care/practice may be sufficient to judge a student unsafe.

A student whose clinical care/practice is judged unsafe and/or unprofessional by ACC faculty or clinical staff may be removed from the clinical experience. To resume the clinical experience, a student who has been removed must comply with written stipulations prescribed by the faculty for readmission to the clinical experience.

The faculty responsible for the clinical experience will review the clinical care/practice of a student who exhibits weaknesses that may lead to unsafe practice and/or unprofessional practice. The faculty, with appropriate input from the student, will develop a set of expectations that the student is to attain to remedy those weaknesses in the current and/or subsequent semester.

Rationale

Faculty have a legal and professional responsibility to assure for the public, other students, ACC, and the Emergency Medical Services that students can practice safely and professionally in their various clinical care/practice.

Grievances Regarding Policies and Procedures

Students who disagree with a policy, procedure, or rule may file a student grievance as permitted by ACC policy. The filing of a grievance, however, does not excuse compliance with current policies, procedures, and rules. Students shall comply with all policies, procedures, and rules until and if such policies, procedures, or rules are withdrawn or modified.

ADA Statement:

Any student with a documented disability (e.g. physical, learning, psychiatric, vision, hearing, etc.) who needs to arrange reasonable accommodations must contact the Disability Services Office at the respective college at the beginning of each semester. Faculty is authorized to provide only the accommodations requested by the Disability Support Services Office.

ACC ADA Counselors – Name - **[XX Contact Number]** / Fax – **[XX Number]**

EGLS₃ -- Evaluation for Greater Learning Student Survey System

At Accordance Community College, professors believe that thoughtful student feedback is necessary to improve teaching and learning. During a designated time, you will be asked to answer a short online survey of research-based questions related to instruction. The anonymous results of the survey will be made available to your professors and division chairs for continual improvement of instruction. Look for the survey as part of the Accordance Community College Student System online near the end of the term.

Course Completion Materials:

This sample document is provided as an example for reference as a “typical” syllabus.

- Students successfully completing the EMSP 2243 course must fill out a NR application and apply their voucher number to be eligible to take the National Registry Certification Exam. Once student is “cleared” for the exam student will need to schedule an exam at a Computer Based Testing site.
- Once NREMT exam is taken and passed student should go to the website below and complete the on-line application for EMT Initial Certification, submit the application, and associated fees to the State of XX Office of EMS <http://www.State of XX Office of EMS>

ACC course materials/student records will be maintained for five years.

The program will not duplicate student state forms or notes. Students are encouraged to make copies of all forms submitted to the EMS program.

NOTICE: Students who repeat a course for a third time will face significant tuition/fee increases at ACC and other state public colleges and universities. Please ask your instructor / counselor about opportunities for tutoring / other assistance prior to considering course withdrawal or if you are not receiving passing grades.

**ACC EMSP 2261 EMT-P Clinical Practicum II
Student/Instructor Agreement**

I have read and understand the contents of the ACC EMS program syllabus

(Print Student Name)

Student Signature

Date

Lead Instructor Signature

Date

This sample document is provided as an example for reference as a “typical” syllabus.

A\ms syllabus EMSP 2261 (9/2013; 1.2014; 2.2014; 4.2014; 7.2014; 8.2014; 10.2014; 11.2014; 4.2015; 5.2015; 8.2015; 10.2015; 11.2015; 2.2016; 4.2016; 5.2016; 7.2016; 9.2016; 10.2016; 11.2016; 3.2017; 4/2017; 5/2017; 6.2017; 8/2017; 5/2018)

SAMPLE