

# **Paramedic Certificate Course Competency Based Syllabus January 20XX**

<b>Course Number</b> EMS 2XX		<b>Course Title:</b> Paramedic Capstone Field Internship		<b>Credit hours</b> X
<b>Hours:</b> XXX <b>Minimum</b> <b>Outside</b> <b>hours: X</b>	<b>Lecture/Discussion</b> X	<b>Lab/Simulation</b> X	<b>Clinical</b> X	<b>Field</b> XXX
<p><b>Course Description:</b> This course provides an opportunity to apply clinical concepts, strategies, and skills in a supervised field setting as a Paramedic intern. The capstone field internship occurs after all core didactic, laboratory, clinical experience, and field experience has been successfully completed. This experience allows the student to assess and manage patients in the prehospital environment where the student progresses to the role of team leader. Minimum team lead experience is established and is based on the depth and breadth of the Paramedic profession and must be successfully completed by each student. In addition, all required minimum patient contact types, skills, and age groups must be successfully completed/performed. The capstone field internship includes a minimum number of XXX required hours. Additional hours may be required when Program faculty initiate a performance improvement plan (PIP) to insure competency. All students are expected to satisfactorily complete the capstone field internship within XXX hours.</p>				
<p><b>Prerequisites:</b>            Successful completion of Paramedic: EMS1XX &amp; EMS1XX Didactic / Laboratory, and EMS 2XX Clinical Experience            Successful completion of ACLS, PALS, BLS, PHTLS            All required immunizations            Repeat background check and/or drug screen if required by the assigned EMS agency            Fit test as required by specific facilities            Current EMT or AEMT certification valid throughout the internship</p>				
<p><b>Methods of Instruction:</b>            During the capstone field internship, the student is assigned a preceptor who serves both as a coach and evaluator. In addition to preceptor supervision on patient encounters, the student is expected to spend time studying and participating in drills, skill practice, and scenarios.</p>				
<p><b>Program Goal:</b>            To prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.</p>				

## **Capstone Field Internship**

The capstone field internship allows the student to develop and practice high-level decision making by integrating and applying Paramedic learning in all educational domains. During this time the student assesses and manages patients in the prehospital environment and progresses

to the role of Team Leader.

### Capstone Field Internship Logistics

1. The student is matched with a preceptor at an assigned EMS agency. Students may not solicit their own preceptor or EMS agency.
2. Field internship placements are determined by the Program and the student may not refuse assignment at a specific agency or schedule. Scheduled shifts may include day, evening, and holidays.
3. Students may not request time off during the scheduled field internship.
4. The student is responsible to enter all field internship scheduled shifts into the data tracking system prior to the start of the capstone field internship.
5. The student works the same shift as the assigned preceptor.
6. A minimum of XX hours of capstone field internship is expected each week.
7. Students who have experienced a special circumstance such as an illness, must notify the faculty member coordinating field internships immediately regarding missed shifts, missed deadlines, etcetera.
8. Daily evaluations are completed by the student (self-evaluation) and the preceptor.
9. Major evaluations are completed at XXX, XXX, and XXX hours.
10. While in the internship the student is expected to communicate weekly with the faculty member coordinating field internships regarding progress and any issues. This may be in the form of email or phone communication.
11. Any perceived issues regarding the progression of the internship must be communicated within a week to the faculty member coordinating the internship.
12. Skill tracker data for the shift must be entered no later than the completion of the shift to include skill and patient contact tracking, patient care reports, and evaluations. Failure to submit as required may result in progressive discipline which can lead to dismissal from the program.
13. Students are responsible for monitoring their own progress toward completing all required skills, patient types, and ages and for informing their preceptor and faculty internship coordinator of the progression and any deficiencies.
14. In addition to student evaluation by the preceptor, the student is required to evaluate the preceptor.
15. The student role progresses to team lead during the capstone field internship.
16. Team lead definition: During the team lead phase, the preceptor is the one who deems the student capable of leading the EMS responder team in the assessment and management of a variety of patient types/complaints/calls. The preceptor observes and evaluates, and only offers advice or suggestions if crucial errors or omissions occur. The student is 'in charge' and demonstrates the knowledge, skills and attitudes to manage any call to which the unit is dispatched. During this phase the emphasis shifts from assessing the student's individual skill competency to assessing their ability to manage the entire scene and patient. It is not necessary for the student to perform all the skills, or any individual skills, outside of assessment. However, they must be the person responsible for the choreography of the scene and direct patient care. The student has successfully led the team if they have *conducted a comprehensive assessment* (not necessary performed the entire interview or physical exam, but rather been in charge-of the assessment), as well as *formulated and implemented a treatment plan* for the patient. This means that *most* (if not all) of the *decisions*

have been made by the student, especially formulating a field impression, directing the treatment, determining patient acuity, disposition and packaging and moving the patient (if applicable). Minimal to no prompting was needed by the preceptor. No action was initiated/performed that endangered the physical or psychological safety of the patient, bystanders, first responders or crew.

17. An ALS contact is defined as including one of the following. Successful: IV start, intubation, needle decompression, cardiac pacing, cardioversion, defibrillation, CPAP, or a medication given by the intern.
18. A capstone field internship close-out is scheduled with each student at the completion of all required hours. The student is responsible to schedule the close-out meeting with the Clinical/Field Internship Coordinator in the final week of the field internship rotation.
19. For additional information, refer to the Paramedic Program Field Internship Manual.
20. At or near the completion of the capstone field internship the student will be scheduled to complete the final summative cognitive exam and the final psychomotor scenario. In the event that the student meets the criteria to allow a retest, the retesting must occur within XX business days of the initial attempt.
21. The student may be dismissed at any point in the field internship for failure to show satisfactory forward progression, failure to meet requirements established in a performance improvement plan, failure to obtain satisfactory ratings by the preceptor based on number of hours completed, failure to attend internship shifts as stipulated, failure to communicate with the preceptor and program Field Internship Coordinator, or other unsatisfactory performance.
22. Students are expected to complete all capstone internship hours in the specified number of hours with no extension.

### **Required Textbooks**

A complete listing of required textbooks, including the current editions and ISBN numbers, is included in the Student Enrollment Agreement.

### **Required Materials:**

Laptop or other smart device  
Program uniform  
Diagnostic tools

**EMS Program Office Hours: 9 AM 5 PM**

**Phone: XXX-XXX-XXXX**

### **Student Minimum Competency Requirements (SMC)**

Recommended *Student Minimum Competencies* (SMC) are established by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP). The Program Medical Director has approved, and the Advisory Committee has endorsed, the Program specific minimum competency requirements. Students are provided the program requirements document which are also specified in the web-based tracking system. The required competencies include live and simulated experiences. All minimum program requirements must be met to successfully complete the Program. The required program numbers are minimums and students are expected to continue to seek skill and patient encounter opportunities.

No.	Competency/Objectives
<b>After successful completion of this course the student will be able to:</b>	
1.	Organize and perform patient assessment according to the presenting complaint. Assessment skills must include: evaluation of scene safety, pertinent observation of the environment, patient mental status, complete medical history, and initial, focused, detailed, and ongoing physical examination.
2.	Assess and manage patient complaints and conditions in all age groups.
3.	Evaluate, secure and maintain a patent airway, and provide ventilation, and oxygenation utilizing basic and advanced modalities.
4.	Prepare, administer and record medication administration by all approved routes.
5.	Perform one-person and two-person cardiopulmonary resuscitation.
6.	Record and accurately interpret electrocardiograms in the context of patient needs.
7.	Operate a cardiac monitor/defibrillator under appropriate conditions.
8.	Adapt personal communication styles to the needs of patients, family, bystanders, and other emergency responders.
9.	Respond appropriately to communication from physicians and peers.
10.	Demonstrate appropriate responses and participation as a team member.
11.	Successfully serve as team leader during simulated patient encounters.
12.	Effectively demonstrate the implementation of crew resource management.
13.	Demonstrate competent scene choreography in simulated patient encounters.
14.	Complete accurate, well-organized written reports of all patient encounters.
15.	Communicate patient presentation, assessment, intervention, and response effectively in person, over the radio, and in writing.
16.	Respond to the physical and emotional needs of patients when planning and providing care.
17.	Accept constructive feedback from preceptor and use the information to improve patient assessment and management skills.
18.	Display behavior that is consistent with a professional health care provider.

## Course Completion and Grading

Completion of the Paramedic program is subject to the following criteria:

1. Successful completion of all section **major** exams: unit exams specify the minimum passing grade on each exam
2. Completion of all assignments including quizzes and other assignments.
3. Participation in practical sessions and successful completion of all skills exams, rated on a "Pass/Fail" basis.
4. Completion of the course didactic **final** cognitive exam with a minimum grade of 75%
5. Completion of the Program summative **capstone** cognitive exam with a with a minimum required score
6. Successful completion of the Program summative capstone practical exam
7. Successful completion of the Program summative capstone affective evaluation
8. Completion of all program requirements in the Student Minimum Competency (SMC)
9. Successful completion of ACLS, PALS, and ITLS or PHTLS, according to the pre-set guidelines of the course
10. Compliance with all attendance requirements

The final course/Program didactic grade is weighted and includes the following components:

11. Major/unit exams XX%
12. Course didactic final cognitive exam XX%

### Grading:

- A = 90 – 100%  
B = 80 - 89%  
C = 72 – 79%  
F = ≤ 72%

### Method of Evaluation:

1. Internship performance  
a. Major evaluation XX%
2. Special assignments, case presentation, or research paper XX%
3. Affective grade XX%

### Retest Policy for Major/Unit Exams

1. Major or block exams measure knowledge/competency in the specific content areas and therefore, the student must attain a successful score to continue in the program.
2. The passing score in the Paramedic Program follows the specified score for major/unit exams including the final at the completion of the didactic and lab phases.
3. If the student scores less than the required score on a major exam, the student is retested on a second exam covering the same topics but with different questions.
4. If the score on the retest is less than the required score, the student fails the Program and is dismissed with counseling and suggestions on how to improve performance if they wish to reenter a Paramedic program.
5. On subsequent major exams, the student will only have one additional opportunity to retest a major/unit exam and the same procedure/grading applies.
6. The third instance of failure of a major exam results in dismissal from the program.
7. The didactic final exam is eligible for retest **if** the student has failed no more than one

major exam with a successful score on the retests.

8. The instructor and student will determine a mutually agreed upon time to retake an exam. The exam must be completed by that date, not to exceed XX calendar days.

**Additional Completion Requirements: all courses**

1. Successful completion of the following courses: ACLS, PALS, BLS, and PHTLS
2. Assigned homework
3. Assigned projects and/or case presentations
4. All summative evaluation ratings on the Professional/Affective Behavior Evaluation tool at the end of the course must be fair or good. Any ratings of needs improvement results in a failing grade.

**Policy for Psychomotor Testing**

1. Students must complete requirements for Student Minimum Competency, based on recommendations by CoAEMSP. The Student Minimum Competency Recommendations include both formative experience and evaluation for terminal competency.
2. A psychomotor exam occurs at the completion of the didactic and laboratory phases.
3. The student can be retested on the same day at the discretion of the exam coordinator.
4. The exam coordinator may elect to refer the student for remediation prior to retesting.
5. A second failure of a skill station *requires* remediation.
6. The third retest of a skill station may be conducted by the Program Medical Director or a faculty member.
7. The third failure constitutes failure of the Program.
8. The summative capstone psychomotor exam consists of one complex out-of-hospital scenario.
9. One retest of the capstone scenario is permitted.
10. Failure of the capstone scenario on retest constitutes failure of the Program.

**Attendance Policy:**

Students must attend a minimum of XXX hours during the capstone field internship phase of education. Tardiness is a disruption of the learning environment and is not acceptable. Any student arriving late to an internship shift may be sent home by the preceptor and the hours will count as an absence. The maximum number of hours that may be rescheduled is XX hours. Notification to the Clinical Coordinator of a missed shift must be by email prior to the scheduled shift start time. The student must also notify the clinical site via the preferred method specified by the facility. The instructor will counsel students demonstrating attendance issues.

**Instructor Name:**

XXXX

**Phone:**

(office) XXX-XXX-XXXX

(cell) XXX-XXX-XXXX

**E-mail:**

XXXXXXXXXXXX

**Instructor Office Hours:**

Hours vary based on class activities. Please contact instructor to schedule appointments as necessary.



### **Accommodations for Students with Disabilities**

CES provides reasonable and appropriate accommodations for students with a documented disability. In accordance with the Americans with Disabilities Act (ADA), it is the student's responsibility to notify CES, in writing, of any diagnosed disability and provide the appropriately prescribed accommodations requested. **This documentation must be provided at the time of enrollment and at least XX business days prior to the first day of the program.**

### **Additional Program policies**

Refer to the *Student Handbook* for information regarding all Program policies including accreditation, diversity and discrimination, learning resources, policies regarding payment, withdrawal, dress code, use of electronic equipment, health, drugs and alcohol, injury reporting, academic progress and academic probation, student conduct, conflict resolution, patient confidentiality, use of social media, graduation/completion requirements, and other Program policies.

### **Program Information Disclaimer**

From time-to-time various regulatory, accreditation, public health, or other operational requirements make changes to Program information and policies necessary. When this occurs, changes may be implemented during the term the student is enrolled or the catalog year. In this situation, the staff will work with the students to meet and accommodate the new requirements when possible.

The course schedule may also be altered based on course needs, delivery methodologies, instructor schedules, or other factors.