

Texas Southmost College



*Emergency Medical
Science Program*

EMS Student Policy Handbook 2015



E.M.T. OATH

Be it pledged as an Emergency Medical Technician, I will honor the physical and judicial laws of God and man. I will follow that regimen which, according to my ability and judgment, I consider for the benefit of patients and abstain from whatever is deleterious and mischievous, nor shall I suggest any such counsel.

Into whatever houses I enter, I will go into them for the benefit of only the sick and injured, never revealing what I see or hear in the lives of men unless required by law. I shall also share my medical knowledge with those who may benefit from what I have learned.

I will serve unselfishly and continuously in order to help make a better world for all mankind. While I continue to keep this oath unviolated, may it be granted to me to enjoy life, and the practice of the art, respected by all men, in all times. Should I trespass or violate this oath, may the reverse be my lot. So help me God.

Adopted by the National Association of Emergency Medical
Technicians 1978



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Emergency Medical Science Program Helpful Phone Numbers

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		EMS Program Website	
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EMS Medical Director:		EMS Medical Director:	
Lorenzo Pelly, MD			



A Message to the Students

Welcome to the Texas Southmost College **Emergency Medical Science Program**.

This handbook has been compiled to help familiarize you with the policies utilized by this program as well as available student services.

The **Emergency Medical Science Program Student Handbook** pertains to students that have been admitted to that program and is a supplement to the Texas Southmost College Student Handbook. The Vice-President of instruction and student services is the chief administrator for academic/non-academic policies and procedures,

It is through the spirit of cooperation and communication that students and faculty members share a common goal of learning. In this profession, competence is developed through diligence, determination and patience in the practicum environment as well as the classroom.

The Degree Plan for Emergency Medical Science has been designed to provide the student with a well-rounded curriculum that incorporates Emergency Medical Science classes as well as preparing the student academically to continue their education.

Please remember that you, the student, are the most important asset of this program. Your suggestions are welcomed, appreciated, and may be submitted at any time to the Advisory Committee of this program or directly to the Program Faculty.

Non-Discrimination Statement

Texas Southmost College Emergency Medical Science Program is non-discriminatory in regard to race, creed, color, sex, age, handicap, and national origin.

Texas Southmost College Emergency Medical Science Program further delineates Section 504 of the Rehabilitation Act of 1973, as amended:

No otherwise qualified handicapped individual in the United States as defined in Section 7(6), shall, solely by reason of his handicap be excluded from participation in, be denied benefits of, or be subject to discrimination under any program or activity receiving federal assistance.



Technical Standards (Essential Functions)

An Emergency Medical Science student must possess motor and visual skills that would enable him/her to meet program objectives and perform job duties required in the profession. Specifically, the students:

1. Have the ability to communicate effectively and sensitively in order to assess communication and be able to adequately transmit information to the patient and to members of the health care team.
2. Possess all the skills necessary to safely and accurately perform all emergency procedures and manipulate equipment.
3. Have the ability to lift and move immobile and physically challenged patients.
4. Have the ability to stand or sit for long periods of time.
5. Possess the emotional health required for full utilization of his or her intellectual abilities.
6. Have the ability to recognize emergency situations and take appropriate action.

Mission of the Institution

The mission of Texas Southmost College (TSC) is to transform our communities through innovative learning opportunities.

Role and Scope

Texas Southmost College's mission is guided by our commitment to provide:

- University transfer, career, and technical programs leading to an associate degree or certificate along with courses specializing in college preparatory and developmental education, workforce training, adult literacy, and continuing education to support the evolving needs of citizens, industry, and economic development initiatives within Cameron and Willacy Counties.
- High-quality instruction and learning opportunities in the classroom, online, and through other delivery methods; a supportive and innovative faculty and staff; appropriate technology, equipment, and learning resources; and advising and assessment services to promote transfer to a four-year baccalaureate institution, entry or advancement in the workforce, or lifelong learning.



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- A learning-centered, service-oriented environment that celebrates diversity and inclusion; facilitates growth and development; fosters social responsibility, critical thinking, communication, and innovation; and empowers and engages students, faculty and staff to achieve personal and professional goals.
- Institutional effectiveness that embraces individual accountability, data-driven decision making, change, and an unending pursuit of excellence.

Mission of the Program

Consistent with the mission of Texas Southmost College the faculty of the Emergency Medical Science program is committed to provide high quality, accessible and affordable Emergency Medical Technician education tailoring the needs of the community.

Philosophy

Consistent with the college's values, the Emergency Medical Science program is dedicated to integrity, access, service, excellences, innovation, and success.

Program Outcomes (Goals)

- Goal 1** Upon completion of the program, all students will demonstrate the ability to comprehend, apply, and evaluate information relevant to their role as an Emergency Medical Technician. (Cognitive Domain)
- Goal 2** Upon completion of the program, all students will demonstrate technical proficiency in all competencies necessary to fulfill the role of an Emergency Medical Technician. (Psychomotor Domain)
- Goal 3** Upon completion of the program, all students will demonstrate personal behaviors consistent with professional and employer expectations for an Emergency Medical Technician. (Affective Domain)
- Goal 4** Upon completion of the program, a minimum of 85% of the graduates will be successful on the National Certification Examination.
- Goal 5** Six months post graduation 85% of the graduates will be employed as Emergency Medical Technicians.



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Goal 6 Upon graduation and employment, 85% of the employers and graduates will report average or better in entry level skills in Emergency Medical Science.

Goal 7 Upon completion of the program, the graduate will be proficient, competent, and knowledgeable in all related competencies, develop technical and critical thinking skills, as an entry level Emergency Medical Technician.

EMS Program Description

In the early 1990's, it was recognized that national trends in EMS education were leaning towards higher-level education and the expansion of paramedic program content areas. For this reason, the move from Adult Continuing Education Paramedic training programs to a college based EMS education program seemed to be a logical choice.

Attaining an Associate of Applied Science will allow Students to:

1. Obtain a broadened level of paramedic education consistent with national EMS education trends as well as proposed national curriculum.
2. Attain Texas paramedic licensure upon successful completion of the AAS degree program and Texas Department of State Health Services licensure requirements.
3. Pursue paramedic certification at a cost less than previously required as a result of resources available at the College level.

The TSC EMT-Basic program prepares the Student to apply for and successfully complete the Texas Department of State Health Services EMT-Basic certification exam. Students who successfully complete the EMT-Basic course are encouraged to consider continued education in the Intermediate and Paramedic programs.

TSC's Paramedic program allows "new" EMS Students to pursue either paramedic certification while obtaining an Associate in Applied Science degree. Additionally, this program allows previously trained paramedics to continue their education in order to attain the AAS degree.

EMT and Paramedic courses at the Texas Southmost College are conducted on the beautiful, scenic and historic main campus. The first semester is the EMT-Basic Program, which is followed by the EMT Paramedic program, which includes the A.A.S. Courses of study. Labs are designed to promote the learning and application of clinical skills. Clinical rotations are also required as part of the EMT-Basic and Paramedic courses. These rotations provide exceptional opportunities for Students to learn and apply clinical skills in the hospital and pre-hospital environments.



Full-time faculty instructors maintain regular office hours; however, Students are strongly encouraged to arrange an appointment. Part- time instructors are available by appointment only. Students are also encouraged to utilize the EMT Program Faculty’s web site to obtain current program information.

Qualifications for Applicants

Students are selected for the program after meeting minimum criteria. To qualify for admission the applicant must complete the following:

- 1) Be admitted to or complete an application to Texas Southmost College.
- 2) Submit a completed Allied Health Application for Admission
 - a) Submit transcripts from any colleges attended
 - b) Submit high school transcripts
 - c) Submit scores from the TASP/THEA test
 - d) Three letters of personal reference

Note: Up-to-date immunizations and Criminal Background Check are required of all Student’s prior to any clinical assignments.

Preprogram Courses:

(Suggested that they be taken before entering program, but can be taking concurrently):

BIOL	2301	Human Anatomy & Physiology I
BIOL	2302	Human Anatomy & Physiology II
ENGL	1301	Composition I
MATH	1314	College Algebra
SPCH	1318	Interpersonal Communication

Preference will be given to applicants who have completed (with grade of C or better) Human Anatomy and Physiology (BIOL 2301, 2302) at the time of application.

If any further information is needed please contact the Emergency Medical Science Program Director at (956) 295-3511.



Course Schedules

At the beginning of each semester, Students are provided with a course syllabus. The syllabus includes a schedule of classes, exams, special projects, and assigned reading. Since a tremendous amount of information is discussed in all courses, Students must come to class prepared to discuss and expand upon assigned reading material. The information included in the syllabus will allow the Student to come to class prepared thereby enhancing learning. Should changes to the syllabus be necessary, instructors will inform Students of the changes as soon as is possible. Special classes meeting days, when applicable, are identified in the syllabus.

Program Completion Requirements

EMS Program students are provided with course completion requirements at the beginning of each course. **Students must meet all academic and clinical course requirements in order to successfully complete the course.** Successful completion (e.g. all course requirements are met) of each course is required in order for the Student to proceed to the next EMT course and to complete the specific program. Specific grading policies for EMT courses are discussed in the Course Policies and Procedures section of this handbook. In order to be eligible to take the National Registry certification exam at any level, the student must receive approval from the Course Coordinator, Program Director and Medical Director. Completion of the paramedic program also requires the unanimous approval of the clinical coordinator, program director, and the medical director. Clinical rotations must also be successfully completed including submittal of the required documentation submitted prior to established deadlines. Most importantly, the Student must have successfully demonstrated competency in all required clinical content areas. Oral examinations and other required assignments must also be successfully completed in order to continue in the paramedic program

Disability and Criminal History Evaluation

For the most updated and detailed information please visit the following websites:

Texas Department of State Health Services
RULE §157.37 Certification or Licensure of Persons with Criminal Backgrounds
<http://www.dshs.state.tx.us/emstraumasystems/default.shtm>

National Registry of Emergency Medical Technicians
http://www.nremt.org/about/nremt_news.asp



If any further clarification is needed please feel free to contact the EMS Program Director for assistance.

Texas Certification/National Registry Examinations

For the most updated and detailed information please visit the following websites:

Texas Department of State Health Services

<http://www.dshs.state.tx.us/emstraumasystems/default.shtm>

National Registry of Emergency Medical Technicians

http://www.nremt.org/about/nremt_news.asp

If any further clarification is needed please feel free to contact the EMS Program Director for assistance.

Institutional Accreditation

Texas Southmost College is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools. TSC course offerings are approved by the Texas Higher Education Coordinating Board, Texas College and University System, and the Texas Education Agency.

Program Accreditation

The UTB/TSC Emergency Medical Science Program is accredited by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP). The Commission on Accreditation of Allied Health Education Programs (CAAHEP) accredits programs upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

Committee on Accreditation of Educational Programs for the EMS Professions: <http://www.coaemsp.org/>

Commission on Accreditation of Allied Health Education Programs: <http://www.caahep.org/>



Certification Requirements

This course deals with medical techniques, which cannot only be lifesaving, but if improperly used, absolutely fatal. It is imperative that individuals certified in these techniques demonstrate sound, mature judgment under pressure. Therefore, students will not be allowed to sit for a National Registry Exam without the approval of the Course Coordinator and Program Director. Students who successfully complete courses offered by the EMS Program are eligible to apply to take the National exams at the appropriate level.

For students who may need accommodations for disability, the Bureau of Emergency Management (TDSHS) and the National Registry (NREMT) have established eligibility for disability accommodations on a case-by-case basis.

The nature of the EMS profession requires that restrictions be placed by TDSHS and NREMT's on Certification of persons with criminal histories and some physical limitations. The Bureau of Emergency Management (TDSHS) and the National Registry (NREMT) review applicants on a case-by-case basis. Questions regarding certification of applicants with criminal histories or disabilities should be directed to the Bureau of Emergency Management (TDSHS) and the National Registry of EMT's. Certification requirements, procedures and fees vary from state to state. It is the responsibility of a student who is coming from another state or wishes to practice in another state to contact the appropriate agency regarding certification or reciprocity procedures.

Course Fees

Please refer to the current schedule of fees as presented by the Office of the Registrar.

Student Records

The current EMT Student records are maintained in the EMS Program Director's office in accordance with Family Educational Rights and Privacy Act (FERPA) guidelines. These files include student personal information, admission documentation, application, transcripts, certification history, practicum and classroom education data. These documents are secured and may be reviewed by making arrangements with the EMT program director.



Student Work Policy

As in all Health Science Programs at Texas Southmost College, working full-time while enrolled in a program is difficult and not recommended since work schedules generally conflict with class and or/practicum rotations. Students in this program will not be substituted for regular staff even though they may be competent in certain aspects of Emergency Medicine. Should a student be employed in any facility that is an affiliate of the program, they may do so only during times where it does not involve or conflict with program activities. Additionally, should a student be employed by a facility where practicum rotation is normally conducted, they may not use “employer time” to substitute for program practicum requirements.

Behavioral Conduct

TSC Emergency Medical Science students representing Texas Southmost College will be expected to conduct themselves in such a manner as to reflect favorably upon themselves and the program. Every effort is taken to provide for all students an academic environment that is conducive to academic endeavors, social growth, and individual self-discipline. The College assumes that student eligible to perform at the College level are familiar with the ordinary rules governing proper conduct and that they will observe these rules as a matter of training and habit (See TSC Student Handbook Discipline Code/Sanctions).

Code of Conduct

As Emergency Medical Services providers strive to improve professional status, it is incumbent upon each provider to demonstrate the qualities of a “true professional”. EMS Students are equally vital to this effort as they are frequently exposed to and evaluated by patients and other healthcare providers. The attitude, appearance and performance of EMS Students directly impact the impressions others have of the EMS profession as a whole. Students who develop habits, skills, knowledge and abilities consistent with a professional code of conduct improve the likelihood of their future success as EMS professionals. Lifelong, professional EMS habits and skills developed now will most likely be recognized and appreciated by prospective EMS or other clinical employers. Code of conduct elements are explained below to assist Students in understanding their purpose and value to the Emergency Medical Services System and Profession. Students of the EMT Program are expected to conduct themselves in a manner consistent with this code of conduct whenever they represent the EMT Program.



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1. The primary purpose of Emergency Medical Services is to respond to persons in need of medical, psychological and, in some cases, social assistance in a compassionate, medically appropriate manner. EMS is primarily about providing a public service. EMS providers are often invited into the homes of strangers in anticipation of compassionate, appropriate care and safe transportation to appropriate healthcare facilities. Although at times it may seem difficult, EMS providers must not forget the community's expectations of respectful, dignified, compassionate care as well as timely, efficient, clinically appropriate service. EMS Students demonstrate this by their constant willingness, eagerness and desire to assist in all patient care tasks even if the tasks appear menial or inconsequential.
2. As extensions of the physician, Paramedics (and EMT's to a certain extent) have a responsibility to respect the physician license under which they are allowed to function. EMS providers render medical care when a physician is not immediately available. This truly is a privilege that must not be taken lightly by the EMS provider. It has been earned through years of professional work by many dedicated physicians, paramedics, EMT's, and EMS educators. The physician and patient entrust the paramedic and EMT to respect this privilege. Thus, the responsible performance of paramedics and EMT's contributes to continued professional growth and clinical advancement of EMS. EMS Students demonstrate their respect for the physician/paramedic (EMT) relationship by following established clinical training guidelines and performing only those procedures that have been authorized by a physician.
3. Respectful interaction with other members of the healthcare community is vital to quality care of the patient. The EMS provider represents one member of a much larger team of healthcare providers who each play a role in the care of the patient. Since the EMS provider is often the first team member to care for the patient, his/her interaction with other healthcare providers is often crucial. Effective interaction requires the EMS provider to conduct himself/herself in a respectful, courteous and knowledgeable manner. It requires that the EMS provider be attentive to and respectful of the ideas of other healthcare team members. Respectfully disagreeing in the appropriate setting is acceptable. However, the patient's care must never be jeopardized. EMS Students may demonstrate their gratitude for the opportunity to be a part of this team by actively assisting and participating during clinical rotations and classroom learning. The Student should take advantage of this tremendous opportunity to learn from other members of the healthcare community.
4. EMS providers must respect and recognize the value of teamwork and leadership. EMS providers rely on other team (crew) members to assist in accomplishing the task of providing care and service. The EMS provider or Student who fails to utilize effective



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team listening, communication, and delegation skills will most likely be ineffective. Leadership must not be confused with command. The effective EMS provider and Student will develop and practice skills that convince team members to follow the leader's plan of action.

5. The EMS provider must recognize the continuum of education that is characteristic of the science and art of medicine and, therefore, maintain a personal responsibility for his/her never-ending education. Both EMS providers and Students must constantly strive to learn from each and every educational and clinical experience. As the practice of medicine changes, so must the practices of the EMS provider. Students must take advantage of the learning opportunities and resources provided to them. The better the Student's educational and clinical experiences, the better prepared he/she will be to function as an EMS provider.
6. As members of the healthcare community, EMS providers are rightfully held to an extremely high standard of moral and ethical conduct. Honesty, confidentiality, respect for others, respect for the healthcare profession, a willingness to serve, a willingness to learn, and clinical proficiency are expectations of the EMS employer and, more importantly, the patient and community. EMS Students must conduct themselves in a manner that leaves no question as to their high standards of moral and ethical conduct. The privilege to provide medical care under a physician's license and the consent to provide this care to "strangers" depend entirely on the trust and respect earned by the EMS provider through his/her conduct.

Students who demonstrate conduct or performance that is contrary to this Code of Conduct may be subject to disciplinary action, which may affect their status within the course and with the College. All students must follow the guidelines outlined in the most recent TSC Student handbook, which may be found on TSC Homepage. All Policies are subject to change and students will be given any changes in writing.

Academic and Clinical Dishonesty

"An academically dishonest act intentionally violates the community of trust upon which the pursuit of truth is based". For EMS providers, academic and clinical dishonesty violate the standards of moral and ethical conduct established by our profession. More importantly, it violates the trust developed between us and our patients and healthcare professionals. The following illustrate specific acts of academic dishonesty. It is not intended to be all-inclusive.

1. **Any use of external assistance during an exam unless permitted by the instructor.**

Examples include:



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- a. Communicating in any way with another Student during the exam
 - b. Copying material from another Student's exam.
 - c. Allowing another Student to copy from your exam.
 - d. Using unauthorized notes, calculators, or other devices.
2. **Any intentional falsification or invention of data or information in an academic or clinical exercise.**
- a. Inventing, altering, or falsifying data for a patient report
 - b. Submitting materials as your own when someone else completed or created the work.
 - c. Communicating false, altered, or incomplete information within the course of clinical care and/or clinical documentation.
3. **“Plagiarism is the appropriation and subsequent passing off of another’s ideas and words as one’s own.”** If a Student intends to use the words or ideas of another, he/she must provide an acknowledgement of the original source using a recognized referencing practice. Any inference that such words or ideas are those of the Student is considered plagiarism. *Cases of Academic Dishonesty may be handled internally by the School or referred to the Dean of Students.

Classroom Conduct

Classroom activities (didactic and laboratory) are an essential part of EMT Program courses. Although EMS instructors strive to establish an informal classroom environment, Students must conduct themselves in a manner that continues to facilitate learning. Students may have fun in the classroom while also learning.

However, Students are expected to:

1. Come to class prepared for the scheduled subject or activities,
2. Behave in a manner that does not interrupt classroom or laboratory activities.
Examples of disruptive behavior include frequent tardiness, leaving early, private conversations during class, and inappropriate or offensive behavior.
3. Ensure that cellular telephones, radios and pagers do not disrupt the classroom or laboratory activities. Although TSC prohibits the use of cellular telephones and pagers, the EMS Program recognizes that many of EMT Students are required to maintain these devices for an on call basis. Students are expected to ensure that the activation of these devices does not disrupt classroom, laboratory, or clinical activities.
4. All students are required to have either a laptop, or other alternative electronic device with them for all class periods.



Attendance

Students are encouraged to attend 100% of the scheduled class sessions; otherwise, it is the student's responsibility to acquire any missed information and schedule make-ups, where applicable. **A Student may be dropped from the course and EMS Program for excessive absences. Excessive absences are defined as more than three absences with direct adverse impact to the student's grade.** Whether an absence will be excused will be left up to the discretion of the program instructor. A roster of class attendance will be kept. It is the policy of TSC EMS Program to require Students to attend classes punctually and regularly so that the learning objectives of the course may be accomplished. **An absence is assessed each time the Student is not in attendance during a regularly scheduled period of instruction. The assessment does not depend on the cause for the absence, and applies to instructional, laboratory, and clinical sessions. In each semester, the assessment of absences begins the first day of class.**

Clinical Attendance

The number of clinical/EMS rotations available to Students are limited and strict enforcement of attendance will be imposed. Failure to comply with any of the course policies will result in the Student being sent home. Your Clinical Coordinator may impose any restrictions or limits he/she deems necessary to ensure fair and adequate availability of clinical/EMS rotations. Students may not leave their assigned areas without the Clinical Coordinator's permission. **Any Student who is not in their assigned clinical/EMS site may be sent home or dropped from the course.** If you are unable to report to a scheduled clinical/EMS site you must contact your Clinical Educator and/or Clinical Coordinator. If the rotation is at an EMS site you are responsible for notifying the EMS provider as well.

Patient Reports-are due on the date and time assigned by the Clinical Coordinator. Reports must be done using the format designated by the clinical coordinator to be considered correct. No late work will be accepted and will reflect negatively on your grade. Some additional EMS clinical hours may be necessary to complete all of the EMS reports necessary to pass the course. You may not schedule your own rotations and must adhere to the schedule assigned by the clinical coordinator. No clinical rotations may be done while at work. All clinical rotations must be done as third rider in the patient compartment. Students are prohibited from driving the ambulance.

Any questions or problems regarding your clinical rotations should be addressed to your clinical instructor or refer to **The TSC Emergency Medical Science Program Student Handbook** As a reminder, patient records are always confidential and no names should be used. Watch for



addresses or any patient information that can be used to identify a specific patient. Do not carry any legible patient information away from a clinical site with you. Patients are always John or Jane Doe.

Academic Assistance

The EMS Program faculty and staff believe strongly in their responsibility to provide an environment in which Students may succeed. Faculty and staff members will gladly provide additional instruction/tutoring upon request. Please let your instructor know if you feel overwhelmed or if you are falling behind so that assistance may be offered to you.

Communicating With Instructors

Students having course questions or concerns are requested to address them to the primary instructor for the course. If the Student feels he/she has received an inadequate response, the Student should then address the question or concern to the EMS Program Director. If this does not resolve the Student's concern, he/she should contact the Allied Health Program Chair and then School of Health Science's Dean. Questions or concerns regarding clinical rotations MUST FIRST be addressed to the Clinical Coordinator.

If you have an important message to give to the EMS Program faculty or staff, verbal communication may not be sufficient. Students may be advised by the faculty or staff to write a detailed and dated memo to the instructor. The Student may wish to have 2 copies. If desired, the instructor or staff member will sign both copies so that the Student may keep one for his/her records. Although this is infrequently required, it can prevent incidents of miscommunication.

Profession Ethics/Confidentiality

Students must remember at all times that the information in a practicum area is confidential. **Students shall not tell patients, parents, friends, relatives, or non-hospital employees any results of examinations or the nature of any illness.** The physician gives this information to the patient only. **Failure to comply with the above rule will result in a disciplinary action to be decided by the program director, faculty, and clinical instructor.** It is vital that the student complies with the code of ethics for the Emergency Medical Science profession as developed by the National Association of Emergency Medical Technicians.



Disciplinary Action

Students who show evidence of poor attitude, inappropriate conduct, unwillingness to participate in class or patient care activities, or who demonstrate a lack of respect for clinical affiliate organizations may be subject to dismissal from the EMS Program. Students may be barred from hospital and/or ambulance clinical rotations. This, of course, would make it impossible for the Student to successfully complete the course.

The following actions will result in disciplinary action:

1. Excessive absences or tardiness
2. Failure to adhere to the EMS program's uniform policy
3. Violation of any hospital, clinical affiliate or TSC policy
4. Attitude problem causing distraction to others or contrary to the Code of Conduct
5. Unsatisfactory affective behavior evaluations

The Student will be immediately dismissed from the EMS Program for:

1. Drinking alcohol or being intoxicated while on "duty" (e.g. during a clinical rotation, class, or lab)
2. Use of mind-altering drugs or substances while on "duty" (e.g. during a clinical rotation, class, or lab)
3. Willful damage of hospital, clinical affiliate, TSC or EMS property
4. Conviction of a felony during the program
5. Divulging confidential information
6. Sexual harassment or assault, which may include obscene jokes/gestures or inappropriate touching
7. Constant disruption of class or lab instruction

Grievance Procedure

Students having a grievance concerning an evaluation, instruction or dismissal from the program must first discuss the matter with the course's primary instructor. If you are not satisfied with the response of the instructor, you should contact the EMT Program Director. Additional appeals should follow the TSC grievance procedures.

Student Conferences

Course Instructors are encouraged to schedule a mid-term and/or final Student conference with each Student. The primary objectives of the conference are to:

1. Instructor
 - a. Provide an overall evaluation of the Student's classroom and clinical performance,
 - b. Provide the Student with specific performance improvement recommendations,
 - c. Address Student concerns



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2. Student

- a. Discuss the overall evaluation of classroom and clinical performance,
- b. Discuss methods of performance improvement and develop a plan for improvement (if necessary),
- c. Communicate course performance concerns to the instructor.

Students are encouraged to request a meeting with the course instructor to discuss performance concerns and course questions regardless of the mid-term or final Student conferences. The EMS program staff welcomes the Student's sincere interest in his/her course performance and will gladly assist the Student with these issues.

Student Status

EMS Program staff may at any time summarily relieve the Student of any specific assignment or request the Student to leave an assigned area for any reason deemed related to the quality of patient care OR to the safety of TSC and/or clinical affiliate staff. Students must not represent themselves as employees or representatives of the clinical affiliate. Instead, Students should always clearly identify themselves as an "EMS Student" or "Paramedic Student" of TSC. Students will NOT be considered employees of the clinical affiliate for purposes of compensation or benefits. Students must obtain prior written permission from the clinical affiliate before publishing (e.g. publication outside of a classroom assignment) any material relating to the clinical experience.

Liability Insurance

All students in the Emergency Medical Science program are required to have professional liability insurance. This insurance is provided on a group basis and the cost for the professional liability insurance is included in the fees paid in which a practicum course is required.

Grievance Policy

The intention of the student grievance policy procedure at TSC is to assure the aggrieved student of due process in the disposition of the grievance or complaint. While the procedure will not guarantee the student that the result will be totally satisfactory, the college intends for the procedure to provide sufficient options for resolution of the matter. The procedure for filing a grievance can be found in the official TSC Undergraduate Catalog.



Probation Policy

Probation periods may be required of the Emergency Medical Science Program student. Probation is a trial period in which the student must improve or be withdrawn from the program. At the discretion of the Emergency Medical Science Program Director, a student may be placed on probation in the Emergency Medical Science Program for any of the following:

1. Unsatisfactory performance in the classroom, laboratory and/or practicum
2. Unsatisfactory classroom lab and/or practicum attendance and punctuality
3. Inability to maintain physical and mental health necessary to function in the program.

EMS Student Classroom/Lab

Emergency Medical Science Program Lecture and Lab courses are taught at the TSC campus. The classroom is located in the LHSB in room 1.402. Specific times are published in the TSC course schedules.

Laboratory and Tutoring

Students may utilize the Emergency Medical Science classroom/lab to practice Emergency Medical Science procedures. A student can do this by scheduling time with faculty or the program director because lab use is **ONLY** allowed in the presence of a faculty member. Students **ARE NOT** to use the labs unless a faculty member is on the premises. Students may request tutoring services.

Immunizations and Vaccinations:

The Texas Department of Health Has announced changes in immunization requirements for students enrolled in Health-Related Institutions of Higher Education effective April 1, 2004. All students enrolled in health-related courses, which involve direct patient contact in medical facilities must show proof of following immunizations prior to the start of direct patient care or show serologic confirmation of immunity to:

- Measles, Mumps, Rubella (MMR)
- Tetanus-diphtheria toxoid (DT) within last 10 years
- Complete series of Hepatitis B
- Varicella (Chickenpox)
- TB (required yearly) Chest X-ray (required every two years)



Infection Control:

Students are required to comply with the infection control policies of the clinical site. At a minimum, Students should:

- Wash their hands before and after contact with patients and patient care equipment
- Wear gloves when contact with blood, body fluid, tissue, or contaminated surfaces is anticipated
- Wear gowns or aprons when splattering of blood or other potentially infectious material is likely
- Wear masks and eye protection when aerosolization or splattering of any body fluid is likely to occur
- Clean all blood spills promptly with an appropriate disinfectant or germicidal agent
- Consider all blood specimens as potentially infectious
- Locate protective mouthpieces and/or bag valve masks at the beginning of the clinical rotation

Accidental needle sticks, mucosal splashes, contamination of open wounds, and other possible infection control accidents must be immediately reported to the preceptor and appropriate clinical site staff. This should be done only AFTER taking appropriate necessary decontamination and medical care actions (e.g. washing the exposure, flushing the eyes, etc.). Additional procedures required by the clinical site must also be followed.

INFECTIOUS DISEASE EXPOSURE POLICY

If an EMS student suffers a known or suspected exposure to an infectious disease during clinical rotations he/she should advise the supervisor of the clinical area in which the rotation is being done. Sections 6 and 7 of this policy should be followed. The **TSC EMS Clinical Coordinator** should be notified as soon as possible. The care and compensation of infected students is the financial responsibility of that person and his/her insurance. **The EMS Training Program** is not able to offer financial compensation or to absorb the cost of medical treatment for infected students.



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Definitions: Of the several definitions included in this policy, the following are considered unique.

- a. “**Exposure-prone procedure**” means a specific invasive procedure that poses a direct and significant risk of transmission of HIV or Hepatitis B virus, as designated by the EMS Training Program. Recognizing that determining whether a specific invasive procedure is exposure prone requires case-by-case consideration of individual infected health care workers, The EMS Program designates all invasive procedures as exposure prone until the expert review panel has determined otherwise. Accordingly, the term “invasive procedure”, as used in this policy shall mean “exposure-prone procedure.”
- b. “**Expert Review panel**” means a panel convened to provide counsel to a health care worker infected with the HIV or Hepatitis B virus regarding the performance of invasive procedures.
- c. “**Universal Precautions**” means procedures for disinfection and sterilization of reusable medical devices and the appropriate use of infection control, including hand washing, the use of protective barriers, and the use and disposal of needles and other sharp instruments as those procedures are defined by the Centers for Disease Control of the United States Public Health Services.

1. Risk and Obligation:

- a. The functions of the TSC EMS Training Program entail an unavoidable risk of exposure to infectious disease among everyone.
- b. No person may refuse to care for a patient infected with HIV, hepatitis B virus, or any other infectious disease solely because of fear of infection.

2. General Policy: It shall generally be the policy of **The TSC EMS Training Program** to adopt the most current regulations, guidelines, and recommendations available from recognized authorities.

3. Policy Education: **The TSC EMS Training Program** shall regularly provide instruction to all students about personal safety and hygiene measures to reduce risk of infection either from or to other persons in the facility.

5. Pre-exposure immunization and monitoring: **The TSC EMS Training Program** shall require proof or certification of appropriate immunity from selected diseases for all students.



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Advanced EMS students are required to have the following immunizations:

- Tetanus-diphtheria (within 10 years of initial enrollment)
- Oral trivalent polio (at anytime in the past)
- Measles-Mumps-Rubella (since 1980 if born after January 1, 1957)
- Hepatitis B

All EMS students are required to document a tuberculosis test by the ppd method within one year of the date of initial enrollment.

Students who may perform invasive procedures should know their HIV antibody and hepatitis B antibody or antigen status.

6. Exposure Reporting: Students who have a known or suspected exposure to an infectious disease during the performance of their academic responsibilities shall report the incident promptly to their immediate supervisor in the clinical area and to the EMS Clinical Coordinator. They will provide a written statement of the date and circumstances of the exposure to the EMS Clinical Coordinator.

7. Post-exposure Prophylaxis and Counseling: If exposure to an infectious disease is known or reasonably suspected to have occurred during the performance of academic or employment responsibilities at **The TSC EMS Training Program**, the individual will incur all cost. In accordance with TDSHS and the Centers for Disease Control Recommendations, this shall include: measles, rubella, mumps, tetanus, diphtheria, poliomyelitis, hepatitis A, hepatitis B, meningococcal disease, tuberculosis, and HIV.

8. Post-exposure Surveillance and Counseling: If exposure to an infectious disease is known or reasonably suspected to have occurred during the performance of academic or employment responsibilities at **The TSC EMS Training Program**, it will be the responsibility of the individual to continue surveillance and counseling. In accordance with the Guidelines of TDSHS and Centers for Disease Control surveillance shall include: rubella for pregnant women, tuberculosis, HIV, syphilis, and hepatitis.

9. Infection Compensation and Care: The care and compensation of infected students is the financial responsibility of that person and his/her insurance. **The TSC EMS Training Program** is not able to offer financial compensation or to absorb the cost of medical treatment for infected students.



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10. Isolation of Infected or At-Risk Students:

- a. Students of **The TSC EMS Training Program** who are infected with a disease shall not perform any activities that involve a known, demonstrated risk of infection. In general, exclusion from specific activities because of infection with or exposure to any disease shall be made on a case-by-case basis by **The TSC EMS Training Program** Medical Director. Persons who test positive for the HIV antibody or the hepatitis B antibody or antigen shall not perform an invasive procedure unless the person has sought counsel from **The TSC EMS Training Program** Medical Director and has been advised under what circumstances (if any) the person may continue to perform the invasive procedure. If the person must notify a prospective patient of the person's positive status for the HIV antibody or the hepatitis antibody or antigen and obtain the patient's consent.
- b. **The TSC EMS Training Program** Medical Director panel and any other consultants shall protect the confidentiality and privacy rights of the infected person. The decision about notification or follow-up studies of patients who may have been exposed to any infectious disease by personnel or students shall be made by **The TSC EMS Training Program** Medical Director on a case-by-case basis in consultation with state and local public health officials.

11. Alternate Responsibilities and Duties: Students who are infected or at risk of infection from diseases covered by this policy, are otherwise well, and who are excluded from engaging in certain activities which incur risk to exposure to infectious diseases, may be offered alternative responsibilities and duties.

12. Confidentiality: All information acquired pursuant to this policy regarding any aspect of the infectious disease status of any person shall be confidential unless disclosure is authorized or required by law.



Defibrillation/AED Policy(s):

Automated External Defibrillator (AED) /ECG monitor Student Safety and Use: Standard Operating Procedures (SOP)

- I. **Purpose:** is to ensure that all students and faculty members follow the standard operating procedures to minimize and prevent accidental shock. All incidents will be reported to the Director and the Clinical Coordinator immediately. All incidents will be documented with the attached SOP's.

- II. **Definitions: Automated External Defibrillator (AED)** - Small portable life-saving device that can analyze heart rhythms of cardiac arrest victims to determine if the heart has gone into ventricular fibrillation and will deliver an electrical shock to the heart if necessary to restore the heart's normal rhythm. **Manual external defibrillator / monitor** - The units are used in conjunction with (or more often have inbuilt) electrocardiogram readers, which the healthcare provider uses to diagnose a cardiac condition (most often fibrillation or tachycardia although there are some other rhythms which can be treated by different shocks). The healthcare provider will then decide what charge (in joules) to use, based on proven guidelines and experience, and will deliver the shock through paddles or pads on the patient's chest.

- III. **Use: Students:** Under no circumstance will any student place cardiac pads on themselves or other to practice the use of the manual settings on the defibrillator to simulate any cardiac scenarios. Cardiac scenarios include transcutaneous pacing, synchronized cardioversion, and defibrillation.

Under no circumstance will any student practice delivering shocks to themselves or others; regardless of the joule setting.

- IV. **Accident shock:** If an accidental shock has happened. Care of the student or faculty must take place immediately. Please follow the policies and procedures in place by the university that the person injured receives the



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proper care as soon as possible. Remember that any signs and or symptoms may have a delay onset. Any person shocked should seek advice from a physician if symptoms arise from shock. All refused medical attention must be documented as “against medical advice”. All incidents will be reported to the Director and the Clinical Coordinator as soon as possible and all incidents will be documented.

- V. **Conclusion:** In accordance with these policies and procedures, anyone who purposely or accidentally deviate from the guidelines mentioned will be in violation of standard operating procedures set in place by the EMS program. The Director and the Clinical Coordinator will ultimately have the decision to remove any person from the program. Any faculty member not adhering to the policies set in place by the EMS program can and may be disciplined according to the policies and procedures in place by the university.

Automated External Defibrillator Policies and Procedures

Medical Necessity for Use of AED: Defibrillation is a recognized means of terminating certain potentially fatal arrhythmias during a cardiac arrest. A direct current defibrillator applies a brief, high-energy pulse of electricity to the heart muscle. AEDs accurately analyze cardiac rhythms and, if appropriate, advise/deliver an electric counter shock. AEDs are currently widely used by trained emergency personnel and have become an essential link in the "chain of survival" as defined by the American Heart Association:

- *Early access*
- *Early CPR by first responders or bystanders*
- *Early defibrillation*
- *Early advanced life support*

It is recognized that successful resuscitation is related to the length of time between the onset of a heart rhythm that does not circulate blood (ventricular fibrillation, pulse less ventricular tachycardia) and defibrillation. The AHA states with every minute it takes to respond, the chance for successful defibrillation decreases 7-10%. The provision of timely emergency attention saves lives. Athletic events (both practice and competition) present a high risk for cardiopulmonary emergencies. Therefore, by training in the use of AEDs, the emergency response time is shortened.



Explanation of the Use of AED:

Automated external defibrillator, or AED, means a defibrillator which:

- *is capable of cardiac rhythm analysis*
- *will charge and deliver a counter shock after electrically detecting the presence of cardiac dysrhythmias*
- *is capable of continuous recording of the cardiac dysrhythmia at the scene*
- *is capable of producing a hard copy of the electrocardiogram*

Defibrillation is only one aspect of the medical care required to resuscitate a patient with a shock able ECG rhythm. Dependent on the situation, other supportive measures may include:

- *Cardiopulmonary resuscitation (CPR)*
- *Administration of supplemental oxygen*
- *Drug therapy*

Operator Considerations: *Texas Southmost College EMS program utilizes the LifePak12 monitor and/or AED. The Lifepak 12 is a semi-automatic defibrillator that uses a patented Shock Advisory System. This software algorithm analyzes the patient's electrocardiographic (ECG) rhythm and indicates whether or not it detects a shock able rhythm.*

The Lifepak 12/AED requires operator interaction in order to defibrillate the patient. The Lifepak 12/AED is intended for use by personnel (certified trainers) who are authorized by a physician/medical director and have, at a minimum, the following skills and training: CPR training (which meets the standards of the AHA BCLS "Course C" equivalent) AED training equivalent to that recommended by the American Heart Association

Training in the use of the Lifepak 12

Procedures for Training and Testing in Use of AED

Personnel using the AED must complete a training session each year, to include instruction in:

- *The proper use, maintenance, and periodic inspection of the AED*
- *Defibrillator safety precautions to enable the user to administer a shock without jeopardizing the safety of the patient, the user, or other individuals*
- *Assessment of an unconscious person to determine if cardiac arrest has occurred and the appropriateness of applying an AED*
- *Recognizing that an electrical shock has been delivered to the patient and that the defibrillator is no longer charged*



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- *Rapid, accurate assessment of the patient's post-shock status to determine if further activation of the AED is necessary*

An AED is safe to use by anyone who's been trained to operate it. Studies have shown the devices to be 90 percent sensitive (able 90 percent of the time to detect a rhythm that should be defibrillated) and 95 percent specific (able to recommend not shocking when defibrillation is not indicated). Because of the wide variety of situations in which they will typically be used, AEDs are designed with multiple safeguards and warnings before any energy is released. AEDs are programmed to deliver a shock only when they have detected an irregular heart rhythm called ventricular fibrillation (VF) or fast ventricular tachycardia. However, there are potential dangers associated with AED use. That's why training — including safety and maintenance — is important.

Adequate training in cardiopulmonary resuscitation (CPR) and use of an automated external defibrillator (AED) is an important component of a workplace safety training program. Barriers to traditional in-classroom CPR-AED training programs include time away from work to complete training, logistics, learner discomfort over being in a classroom setting, and instructors who include information irrelevant to CPR. This study evaluated differences in CPR skills performance between employees who learned CPR using a self-directed learning (SDL) kit and employees who attended a traditional instructor-led course. The results suggest that the SDL kit yields learning outcomes comparable to those obtained with traditional instructor-led courses and is a more time-efficient tool for CPR-AED training. Furthermore, the SDL kit overcomes many of the barriers that keep individuals from learning CPR and appears to contribute to bystanders' confidently attempting resuscitation.

Additionally, there is a Lifepak 12 located in the EMS Lab room which can be used to analyze 12 lead EKGs and has both AED and manual defibrillation capabilities based upon the scenario covered. The Lifepak AED performs an automatic self-test every 24 hours. If service is required, the AED activates an alarm. The non-rechargeable lithium batteries have a five-year life. If batteries require replacement, the AED activates an alarm. Personnel using the AED on a regular basis and after each time the AED is used should inspect and clean the AED and check to make sure that all necessary supplies and accessories are readily available.



EMS Course Requirements

All EMT courses must be completed successfully before entering the more advanced course(s) the following semester. Due to the structure and chronological order of these classes, if a student should be unsuccessful he/she would be unable to continue in the consecutive courses until the failed course is completed the following year. Under these circumstances, the student will be required to submit an additional application. Re-admission to an EMS course is not guaranteed but offered only on a space available basis.

It is expected that each student will successfully demonstrate competency in the classroom, laboratory and practicum areas. Grading distribution for all EMSP courses will be assigned according to the following scale:

A = 90-100%

B = 80-89%

C = 75-79%

D = 70-74% (Failing, must repeat course)

F = 69 or below

- * **For any EMSP course, a grade of at least a “C” must be earned. Any EMSP course of a “D” or lower is not considered passing and must be repeated. A student will not be allowed to test out of a course.**

Note: If re-admission is granted, the student will re-enter on a probationary status for at least one semester. At the end of this probationary period, the student will be required to meet with the Emergency Medical Science program faculty to discuss his/her progress.

Please note that if the student violates stipulations of probation, the student will be dismissed again. If a student fails or is dismissed twice during the program, the student will not be admitted for a third attempt.

High Stakes Exam: Students will be required to successfully pass the Fisdap Comprehensive final exam on either their first or second attempt with a passing score of 68. This exam is administered as a high-stakes “go/no go” exam during EMSP 2243. Any student who is not successful in achieving this score will be required to retake the course.

If a student takes this course at an outside educational institution and cannot show a passing score based on the TSC EMS Program standards, the student will be required to pass this exam



on either of two attempts to be awarded a completion certificate and certified as passing for the NREMT exam.

Dismissal/Withdrawal/Readmission Policy

Dismissal

A student may be dismissed from the program for the following reason:

1. Failure to achieve a grade of a 75 or higher in any EMSP course
2. Failure to complete practicum competencies during any EMSP course
3. Inability to adhere to attendance policy
4. Unprofessional appearance or unsafe conduct in the practicum area, including but not limited to unsafe practicum performance (refer to “Criteria for Unsafe Practicum Performance)
5. Failure to comply with rules and regulations of the Program, TSC, or any affiliating agency

The final decision for dismissal will be made by the Program Director after consultation with the faculty, student, and the Dean of School of Health Sciences.

Withdrawal

A student who wishes to withdraw from the Program after registration must meet with the Emergency Medical Science Program Director, notify the registrar and the office of the Vice President of Student Services, return all borrowed books and equipment, and clear all accounts. An exit interview will be conducted by the Program Director to assure proper advisement, documentation of student records and plans for readmission as appropriate.

Re-admission Policy

Students may be readmitted to the Emergency Medical Science Program **once**. Students who have been dismissed for unsafe practicum practice are not eligible for readmission. Readmission is based on **SPACE AVAILABILITY** and on the student’s compliance with conditions/requirements established by the Director and Admissions Committee. Requests for readmission are reviewed by the Emergency Medical Science Admissions Committee. Students applying for readmission must:

1. Apply, in writing to the Emergency Medical Science Admissions Committee, at least 90 days prior to the semester they wish to reenter.
2. Complete all courses in the Emergency Medical Science Program curriculum. If



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- failure does occur, the EMS Program will grant one re-admission, on a space availability basis.
- 3.
 4. Reestablish competency in Lab Skills by obtaining a minimum score of 90% per EMS skill procedure simulated. Reestablish didactic comprehension by obtaining a minimum score of 75% per course final taken.
 5. Demonstrate compliance with recommendations made at the time of withdrawal from the program. Examples of recommendations may include audit or remediation in academic course work; audit or repeat of EMSP course(s) previously taken.

General Academic Courses

BIOL	2301	Human Anatomy and Physiology I
BIOL	2302	Human Anatomy & Physiology II
ENGL	1301	Composition I
MATH	1314	College Algebra
SPCH	1318	Fundamentals of Speech



EMS Course Descriptions

EMERGENCY MEDICAL SCIENCE (EMSP)

EMSP 1501 Emergency Medical Technician-Basic

Course Level: Introductory

Course Description: Preparation for certification as an Emergency Medical Technician (EMT) - Basic. Includes all the skills necessary to provide emergency medical care at a basic life support level with an emergency service or other specialized services.

EMSP 1160 Clinical - Emergency Medical Technician I

Course Description: Practical, general workplace training supported by an individualized learning plan developed by the employer, college, and student.

EMSP 1356 Patient Assessment and Airway Management

Course Level: Intermediate

Course Description: A detailed study of the knowledge and skills required to perform patient assessment and airway management.

EMSP 1161 Practicum - Emergency Medical Technician II

Course Description: Practical, general workplace training supported by an individualized learning plan developed by the employer, college, and student.

EMSP 1355 Trauma Management

Course Level: Intermediate

Course Description: A detailed study of the knowledge and skills in the assessment and management of patients with traumatic injuries.

EMSP 2260 Clinical - Emergency Medical Technician III (10 week course)

Course Description: Practical, general workplace training supported by an individualized learning plan developed by the employer, college, and student.

EMSP 2338 EMS Operations (10 week course)

Course Level: Intermediate

Course Description: Instruction, demonstration, and driving range practice to prepare drivers of emergency vehicles to operate their vehicles safely in the emergency and non-emergency mode.

EMSP 2348 Emergency Pharmacology (10 week course)

Course Level: Advanced

Course Description: A comprehensive course covering the utilization of medications in treating emergency situations.



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EMSP 2261 Clinical - Emergency Medical Technician IV

Course Description: Practical, general workplace training supported by an individualized learning plan developed by the employer, college, and student.

EMSP 2434 Medical Emergencies

Course Level: Advanced

Course Description: A detailed study of the knowledge and skills in the assessment and management of patients with medical emergencies.

EMSP 2444 Cardiology

Course Level: Advanced

Course Description: Assessment and management of patients with cardiac emergencies. Includes single and multi-lead ECG interpretation.

EMSP 2243 Assessment Based Management

Course Level: Advanced

Course Description: A capstone course covering comprehensive, assessment based patient care management. Includes specific care when dealing with pediatric, adult, geriatric, and special-needs patients.

EMSP 2330 Special Populations

Course Level: Advanced

Course Description: A detailed study of the knowledge and skills necessary to assess and manage ill or injured patients in diverse populations.

EMSP 2360 Clinical - Emergency Medical Technician V

Course Description: Practical, general workplace training supported by an individualized learning plan developed by the employer, college, and student.



Course Substitution

Course substitutions for supportive requirements may be carried out only if the course to be substituted is equal or superior in content to the course that is required by the Emergency Medical Science curriculum.

Transfer Policy

PURPOSE:

To provide a mechanism, in which students from other Emergency Medical Science programs may enter the TSC Emergency Medical Science program at an appropriate level.

POLICY:

A student from an **accredited** Emergency Medical Science program may receive transfer credit and enter the TSC Emergency Medical Science program at the appropriate level. A student from a **non-accredited** Emergency Medical Science program will need to complete written and skills test(s) to assess laboratory skill competencies and knowledge of content area(s) before entering into the EMS Program.

GUIDELINES:

1. The transfer student must meet all general requirements for the Associate in Applied Science Degree, as outlined in the TSC catalog.
2. The office of admissions evaluates all student transcripts and will apply appropriate credit.
3. Any previous EMSP course will be evaluated by the Emergency Medical Science Program Director to determine the nature, content and level of the course. **A student may receive full or partial credit for a course they have completed; a written and skill test(s) to assess laboratory skill competencies and knowledge of content area(s) will be required.**

Transfer of Credit from other Non-Accredited Institutions

Previous course work satisfactorily completed at accredited institutions will be evaluated for transfer and may be applied toward a degree program at Texas Southmost College.

Upon the student's request, a transcript will be evaluated after a student has registered for Texas Southmost College credit classes. The request should be made through a counselor or



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department head. An official transcript is required from each college attended. When the evaluation is complete, the number of transferred hours will be recorded on the TSC transcript.

Note: Previous EMSP courses are evaluated by the Emergency Medical Science Program Director to determine content. A student will be required to present a verification exam and laboratory skill competencies if transferring from a program that is not accredited by the Commission on Accreditation of Allied Health Educational Programs as recommended by the Committee on Accreditation of Educational Programs for the EMS Professions.

Students who obtained EMT Certification or Licensure through a program other than the one offered by TSC must present documentation of the content of their EMT courses for evaluation. These students may be required to demonstrate knowledge and skills competency by successfully completing written and/or skill examinations and clinical proficiency evaluations. Leveling work may be prescribed on an individual basis.

Students who received their EMT education outside of a college setting may be eligible to take a competency challenge process through the Texas College system to earn credits for that education in some situations.

The time to evaluate transfer students and students who are competency testing may be lengthy and may delay entry into the program. Applicants should apply as early as possible.

Failure of EMSP Courses

Students must complete the EMS Program within three years of initial enrollment. If one or more classes are failed the first time, the student may repeat the classes the following year if space is available. If one or more classes are failed a second time, the student must re-take all the classes at that particular certification level (i.e. Basic, Intermediate and/or Paramedic). If a student has failed a class multiple times, during their last semester, they may elect to retake that class without taking the rest of the classes at that certification level. If the student passes that class, they may be eligible to receive an Associate in Applied Sciences degree; however, a course completion certificate to allow them to sit for the NREMT exam will not be granted.

- * **First failed attempt** of an EMSP Class: Student will repeat failed class and or/classes.
- * **Second failed attempt** of same EMSP Class: Student will be required to re-take ALL classes at that particular level (i.e. Paramedic, Intermediate and/or Basic).



Service Learning

Service Learning may be assigned to the students at the discretion of the EMS Program Director and/or as part of the EMS curriculum.

Skills Proficiency Verification

Students will be expected to demonstrate competency in all listed skills prior to successfully completing each course. The Student will learn the indications for each skill and have ample time to practice them. Students will be checked off on each of these skills within the laboratory portion of the course in which the skill is introduced and initially taught. Students experiencing difficulty with a skill and unable to demonstrate proficiency will be offered a remediation session and allowed to try again. Paramedic Students will be responsible for basic skills as well as the advanced ones. The laboratory check off of skills must be successfully completed prior to the Student being allowed to utilize the skill in the clinical setting. Each Student must then demonstrate proficiency in each skill during the clinical rotations. If these demonstrations of proficiency are not successfully accomplished within the required time frames, the Student will be dropped from the program.

During paramedic courses, Students may be introduced to additional clinical skills and procedures not included in the lists below. Students will not require skills proficiency verification of these additional skills in order to complete the program. However, Students may be required to practice these skills in the laboratory, and may be allowed to perform these skills under supervision in the clinical rotations. Written and Oral exams may include questions regarding these additional skills. (Examples of additional skills include: 12 Lead ECG acquisition, retrograde intubation, and external cardiac pacing.)

EMT-B (EMT-Basic)

- . Trauma Assessment
- . Medical Assessment
- . BVM Ventilation
- . Oxygen Administration
- . Spinal Immobilization - Seated
- . Spinal Immobilization - Supine
- . Bleeding Control/Shock Management
- . Cardiac Arrest AED
- . Joint Immobilization
- . Long Bone Immobilization
- . Vital Signs including glucometer



EMT-P (EMT Paramedic)

- . All Skills from Previous Semesters
- . Cardiac Arrest Management/AED
- . Dynamic Cardiology
- . Oral Board Station
- . Supraglottic Airway Device
- . Pediatric Ventilatory Management
- . Intravenous Therapy/IV Bolus Medication
- . Pediatric Interosseous Infusion
- . Pediatric Respiratory Compromise
- . Static Cardiology
- . Ventilatory Management Adult
- . Surgical Airways
- . Nasogastric (NG) Tubes
- . Chest Decompression
- . Drug Administration (Intramuscular, Subcutaneous, Endotracheal)
- . Defibrillation and Synchronized Cardioversion
- . External Cardiac Pacing
- . 3-Lead ECG Recognition
- . 12 Lead ECG Acquisition and Interpretation
- . Megacodes

Course Policies and Procedures

Please read these policies and procedures very carefully. Each Student is required to sign a Student contract attesting to his/her agreement with these. The EMS Program Faculty and staff strongly believe that the Student will be most successful if he/she completely understands these policies and procedures. Should a Student have any questions or concerns regarding a course policy, he/she should discuss them with the course's faculty instructor.

Rights and Responsibilities

It is our hope that this course will be rewarding and enjoyable. As a Student, you are investing a great deal of time and money into this course. Therefore, the EMS Program staff will work with you in any way possible to see that your investment is worthwhile. However, much of what you will get from this course will depend on what you put into it. In order to ensure the best possible learning experience for you, each Student is assured the following rights. Of course,



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with these rights come additional responsibilities.
You have the right to know:

1. That this course is officially approved by the Texas Department of State Health Services.
2. That the Program Director, instructors and examiners are certified by the Texas Department of State Health Services.
3. How grades for this course will be determined.
4. The course objectives.
5. The established policies and guidelines upon which you are expected to base your conduct.

Just as you have certain rights, so do you have certain responsibilities. You are obligated to:

1. Treat all patients with dignity and respect.
2. Be at least 18 years of age in order to obtain certification by the Texas Department of Health.
3. Conduct yourself at all times in a manner, which is conducive to learning.
4. Abide by the program policies as outlined to you by the course faculty and staff including all TSC policies.
5. Actively participate in all class and skills laboratory functions.
6. Complete all courses in a satisfactory manner as outlined in this Handbook.
7. Exhibit a professional manner in both attire and conduct.
8. Hold in confidence information relating to any and all patients.
9. Accept responsibility for your actions and academic performance.

Counseling Services

TSC is staffed with counselors to provide assistance to students. For more information call or visit the Counseling Center.

The Counseling Center provides a variety of services to all students pursuing academic or vocational/technical programs of study. The Center offers both group and individualized programs to help students deal with academic, career, and personal concerns. All information relating to the counseling services is discreet and confidential.

Advising

The program director will be the advisor for each student upon admission to provide information about the academic program and to assist in making informed decisions. The program director may be consulted during pre-registration, for adding/dropping a course and



withdrawing from the Emergency Medical Science Program. All advising sessions will be documented.

Disability Services

Texas Southmost College would like to help students with disabilities achieve their highest potential in college. Students with disabilities may request assistance through the Student Services Center. . Some of the services available include note-taking, taped textbook, registration assistance, diagnostic testing, special test considerations and sign language interpreting. An Adaptive Technology and Testing Service are available for student use. All services are elective and must be requested by the students.

To request services, students must register with an advisor in the Student Counseling Center. Counselor/. It is advisable to make this contact well before or immediately after the semester begins. Proof of disability is required (individual documentation requirements vary depending on the disability). Students bear the responsibility of making their abilities and limitations known to the advisor Together, the student and the advisor will decide on the appropriate accommodations and decides on a course of action for informing the instructor, if necessary. Students must request services each semester, as needed.

Student Financial Aid Services

TSC provides financial aid to assist students. The financial assistance for eligible students is available in the form of grants, loans, college work-study, veterans' benefits, and scholarships. The college catalog contains the financial resources available.

Library Facility

The Arnulfo L. Oliveira Memorial Library provides information and access to materials needed to fulfill the teaching, scholarship, and service goals of the university. Students enrolled in the Emergency Medical Science Program have access to library cards.

These libraries have books covering the fields of Emergency Medicine, diagnostic imaging, surgery, nursing, hospitals, public health, and other related allied health sciences. The library offers outstanding computerized searching in all subject fields through more than 50 subscription databases, selected Internet sites, newspapers and journals.

The library also has a Circulation Department, a Reference Department with a computer lab, a Technical Service Department, and Interlibrary Loan Department, The Hunter Room for archival



and genealogical research, study rooms, study areas and carrels, and copying machines to accommodate students.

Learning Assistance Center

TSC has Learning Assistance located in the Student Services Center that serves as an academic resource for students. In a proactive manner, it responds to the needs of the population it serves and is committed to helping the general student population succeed in a college environment. Learning specialists and peer tutors assist students in many areas of study with emphasis on Reading, Writing, Mathematics, Language acquisition, test-taking and study skills.

Professional Organizations

The National Association of EMT's: <http://www.naemt.org/>

The mission of the National Association of Emergency Medical Technicians is to represent and serve Emergency Medical Services personnel through advocacy, educational programs and research. (You will be able to find more organizations on-line which you may choose to join).