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Stadthagen: By appointment

Course Title: EMSP 2463 Clinical – Emergency Medical Technology/Technician (EMT Paramedic)

Course Number and Section: 2015 SU EMSP 2463-21242

Required Textbook: For additional information on texts and reference materials refer to the EMS Program Student Handbook. Cognitive, Affective, and Psychomotor objectives will be discussed during the clinical orientation.

Catalogue Description: A basic, intermediate, or advanced type of health professions work-based instruction that helps students synthesize new knowledge, applies previous knowledge, or gain experience managing the workflow. Practical experience is simultaneously related to theory. Close and/or direct supervision is provided by the clinical professional (faculty or preceptor), generally in a clinical setting. Clinical education is an unpaid learning experience.

Course Competences: At the end of this course, the student will be able to demonstrate competency in functional application of paramedic knowledge and skill with minimal guidance or support from a health care professional.

Prerequisite: Successful Completion of EMSP 2143

Class Format: Class sessions will be shift-based external experience. Assignments are done on an 24 hour shift basis to better match the needs and availability of the MICU staff and the student. Classes will follow A, B, & C shift schedule.

Scans Competencies: The Secretary’s Commission on Achieving Necessary skills (SCANS) was established to determine skills that students need in order to succeed in the work environment. Description of SCANS competencies as follows:

1. Basic skills
2. Thinking Skills
3. Personal qualities
4. Resources
5. Interpersonal skills
6. Information
7. Systems
8. Technology

Orientations: Some orientations are done by the coordinator of some clinical sites, on campus or at their location. On all orientations, (off-site or on campus), uniforms will be worn!
EMSP 2463 Clinical – Emergency Medical Technology/Technician  
(EMT Paramedic)

Evaluation Methods:

The EMS Program utilizes a combination of activity participation, documentation, and preceptor evaluation for cognitive, psychomotor, and affective competencies of pertinent skills to evaluate SCANS Competencies. A per-shift evaluation form will be filled out and signed by the preceptor at the end of every shift. This evaluation includes assessments of the student’s affective domain performance. An internship completion verification must be filled out by the preceptor at the end of the final shift using the final shift evaluation form. For more specific details on evaluation methods refer to the EMS Program Policy/Procedure manual and subsequent sections of this document.

Grading Criteria and Requirements:

The student is required to complete eleven (11) -24 hr- MICU shifts. Grading will be based on 3 factors: (1) successful clinical rotations, (2) a grade of 70%, or higher, in the capstone written exam, and (3) successful performance at the exit Mega-Code (if terminal competences are not fulfilled). *NOTE* Students must use all skills forms to account for the number of skills they have done in clinicals. If the Benchmark (number of skills) set by the College have not been met, the students will have an opportunity to get more skills at the College(supervised) or additional internships until required Benchmark is met.

*Attendance to all scheduled shifts is mandatory.*

NOTE: ON THE FIRST SHIFT, YOU MUST OBTAIN THE STATION OFFICER’S CONTACT INFO. This is the first person you call when you are going to be late or off sick, then the Clinical Coordinator. A no call/no show to ANY scheduled shift will result in a grade of “F” for EMSP 2463, unless verifiable written documentation of an emergency nature is provided. All absences and/or tardiness to an internship must be approved by the Clinical Coordinator. Emergency situations include severe illnesses or injuries, automobile accidents directly involving the student, death in the immediate family, or similar. Heavy traffic or a flat tire, e.g., does not constitute an emergency.

Within the evaluation factors there are items via which a student accumulates points towards their final grade:

- **ePCR:** 100 points
  Minimum of 40 completed pre-hospital patient charts (ePCR and paper):
  - With appropriate medical evaluation, treatments, completeness, spelling, grammar.

Daily clinical/internship preceptor evaluations: 110 points (10 ea)
Minimum of 11
- Positive affective evaluations by preceptor are necessary. (Behavior and attitudes towards job, peers, preceptors, and patients).

Intern Progress Report: 90 points
- Submitted -in person to the Clinical Coordinator-between the 5th and 7th shift.
  - Positive improvement/evaluation, signed by preceptor

Randomly selected narratives (from ePCR or paper): 50 points (10 ea)
Minimum of 5
- Evaluated for appropriate medical content
  - Spelling and grammar will count as 70% of this evaluation.

Tardiness/punctuality: 50 points
- This is an all-or-none category. Any tardiness will result in zero (0) points.
  - Any un-excused tardiness/absence may result in a failing grade for the class.

Preceptor terminal evaluation “release from internship” form: 100 points
- A “full” release results in 100 points.
  - Any additional shifts assigned based on a recommendation from the preceptor will reduce the grade by 5%.
EMSP 2463 Clinical – Emergency Medical Technology/Technician
(EMT Paramedic)

A dismissal from internship will result in a total failure of the course.

Capstone exam (FISDAP): 100 points.
  Minimum grade of 70% is necessary.
  Maximum attempts is two (2), no exemptions.

Terminal Competencies (met) or Mega-Code (if required, see notes below): 100 points.
  The Terminal Competencies must be met (see chart below). Students who are unable to meet all of the required numbers of patients and/or skills will be required to pass a scenario-based evaluation (at the discretion of the Medical Director). A Mega-Code will be conducted in a BHC EMS Lab.
  This Mega-Code is must-pass event. There is one re-test available.

Total points: 600

Time-line/dead-lines:
No later than 5 days after the last assigned shift, all clinical paperwork must be turned in to the Clinical Coordinator (in person). Every day past this deadline will result in a decrease of 20 points from above grading rubric. The deadline for submitting all documents will be published on the eCampus page for each section.

The exit factor is meeting the Terminal Competencies or the Megacode with the Program Director (or his designee) and the Medical Director (or his designee). This is to assure competence. The Mega-Code, if necessary, will be scheduled at the conclusion of the MICU ride outs. This is pass/fail (in and of itself) and is mandatory for completion of EMSP 2463. This also includes meeting deadlines when turning in days and times for your clinicals “request rideouts”. These deadlines will be set by the BHC-EMS Clinical Coordinator.

Grading example:
If your cumulative score is 450, then your grade is 490/600=81.6%

Letter grade rubric:
A letter grade of A for a score range of 90.00% to 100%
A letter grade of B for a score range of 80.00% to 89.99%
A letter grade of C for a score range of 70.00% to 79.99%
A letter grade of D for a score range of 60.00% to 69.99%
A letter grade of F will be awarded for a score less than 60.00%

Note: A letter grade of “C” or better is required to successfully complete any/all EMSP classes.

Details:
The EMS program Capstone Experience(Fisdap) grade will include the following components: 1-Successful completion of the MICU internship. This includes meeting the required program Terminal Competencies, or Mega-Code, as appropriate. The Mega-Code conducted by the Medical Director and the Program Director is for those not meeting the Terminal Competencies as required by the program. Its need will be determined by the Clinical Coordinator and approved by the Program Director.
2-Successful completion of the EMT-P Capstone Exam, administered during EMSP 2463, at the end of MICU assignments.

NOTE: Passing all required components of the Capstone Experience is required to receive a DSHS Course Completion Certificate, approval to schedule the required NREMT CBT exam, and a passing grade on the course.

RETRIEVING YOUR GRADE AND eConnect
Paper grade reports are no longer available from the Dallas Community Colleges. Students may retrieve their grades on-line at https://econnect.dcccd.edu/.
The **MICU internship** consists of (at least) ten, twelve 24 hour shifts on an MICU as assigned by the Clinical Coordinator. There is no maximum number of shifts.

- The evaluated components of the MICU internship are Affective Behavior, cognitive and psychomotor skills and, to include patient assessment, non-invasive as well as invasive medical procedures; Affective measurements such as interaction with patients, public, and public servants; timeliness and general attitude and performance under stress and other adverse conditions; and, lastly, documentation.
- Failure of any of the above components may result in failure of the MICU internship.
- MICU internship is a continual experience. Should a student fail the internship, the student will be required to re-enroll in a subsequent EMSP 2463 class.
- Students who fail the MICU internship will receive a grade of “F” for EMSP 2463 regardless of the score on the written component of the examination.
- Students needing to re-take EMSP 2463 due to an unsuccessful (a grade of “D” or lower) internship component must do so within six months of the end of the internship. This will require re-enrollment into a new EMSP 2463 section. There will be a grade of “D” or “F” recorded for the first attempt. Those not meeting the 6-month deadline will, additionally, need to complete an approved DSHS (or NREMT) remedial/refresher/recertification/NR-prep course—at student’s expense; and obtain approval from both the Program and Medical Directors. Students who do not successfully complete this second attempt are required to submit a written request for re-instatement which will be considered for approval by the EMS Program and Medical Directors, the principal faculty, and the Dean of the HHS Division. The re-instatement approval, if any, will specify what other remedial components must be met prior to re-enrollment. These requirements may include successful completion of module tests or a comprehensive test. Those not approved for reinstatement must re-start the program at EMSP 1438.

**The written component:** consists of 200 multiple-choice questions (at FISDAP discretion the exact number of questions may vary).

- It is a comprehensive exam that validates cognitive competency of the entire EMS Program learning experience. This comprehensive written exam is 200-questions in length. The BHC-EMS Program approved exam for this component is the FISDAP Blue Paramedic Examination. Details on log-on, etc are provided during EMSP 2463. The FISDAP testing fee is collected as part of the enrollment process for EMSP 2463 by the business office/cashier.
- A minimum grade of 70% is required to receive a passing grade.
- The student will have two attempts at passing this written exam.
- After the initial attempt, the student will have one retest available before recertification/refresher training is required. Remediation is offered to students via tutoring, reviews, and attendance to the then current NR-prep course on campus.
- If the student is unsuccessful on this second attempt, a DSHS-(or NREMT) approved recertification/remedial course— at student’s expense— must be successfully completed. Note: This is not the NR-prep course offered on campus. Additionally, the student must re-enroll and complete the entirety of EMSP 2463. This class must be completed by no later than the following semester from the unsuccessful attempt. This will require re-enrollment into a new EMSP 2463 section. There will be a grade of “F” recorded for the first attempt.
- Those not meeting this deadline will, additionally, need to complete an approved DSHS remedial/refresher/recertification course— at student’s expense; and obtain approval from both the Program and Medical Directors. Students who do not successfully complete this second attempt—or subsequent attempts— will be required to submit a written request for re-instatement which will be considered for approval by the EMS Program and Medical Directors, the principal faculty, and the Dean of the HHS Division. The re-instatement approval, if any, will specify what other remedial components must be met prior to re-enrollment. Those not approved for reinstatement must re-start the program at EMSP 1438.
Both components of the Capstone Experience MUST BE successfully completed or the student will not receive a DSHS Course Completion Certificate from the BHC-EMS Paramedic Program. This will result in a failing grade for EMSP 2463.

**Terminal Competencies Required:** All students must be approved as completers by both the Program Director and the Medical Director. This approval is dependent on successful grades, skills, affective behaviors, and clinical/internships. Those not meeting certain parameters – number of skills, patient variety- will be assessed via additional mechanisms such as additional shifts (up to five), or a Mega-Code, at the discretion of the Medical Director before being approved as completers. Once a student is approved as a “completer”, he or she will be released/made eligible to schedule their NREMT CBT exam. Students are personally responsible for creating their NR accounts, paying their fees, and logging on at the appropriate time to schedule their CBT exam. Students are also personally responsible for creating their DSHS accounts and paying their certification/licensing fee. The faculty and staff will assist the students, but the student is ultimately responsible for the completion of these steps.

**Mega-Code:** If required, students must perform in a scenario-based evaluation to the satisfaction of the Medical Director. This scenario will be similar in nature and scope as the NREMT oral boards and the AHA ACLS Mega-Code scenario-based evaluation.

**Course Policies:**
Timeliness, psychomotor abilities, interaction with peers and the public, dress code, grooming, and other behaviors which are consistent with the public’s expectation of an emergency services public servant are all considered as valid measurements towards the successful completion of the EMS Program. The cognitive, psychomotor and affective domains are all evaluated and given significant weights towards successful completion. For more specific details on these course policies refer to the EMS Program Policy/Procedure manual, the preceptor evaluation form, or request clarification from the course faculty. If at any time, the clinical coordinator is contacted regarding unprofessional behavior, the student will be removed from the internship and a grade of F will be assigned.

Any form of disruptive behavior or scholastic dishonesty, such as cheating, medication or substance abuse, disruptive behavior, any weapon possession on the college premises or at college-sponsored activities, inappropriate or unprofessional behavior inconsistent with the professional EMS provider, drinking alcoholic beverages or “partyng” while wearing the BHC EMS Program uniform, intentional damage of any equipment or premises, as defined in the Student Code of Conduct, will not be tolerated and may result in expulsion, suspension, loss of credit, or further appropriate action prescribed by Board policies.

**College Policies:**
The entire Brookhaven College Student Code of Conduct is online at [www.brookhavencollege.edu](http://www.brookhavencollege.edu). These policies provide the guidelines for the educational environment and student conduct and discipline. Additional EMSP-specific policies can be found on the EMS Program Student Handbook.

**Supplies needed:**
A list of supplies needed for the EMS Program is available in the EMSP Student Handbook. All students will have, as a minimum, the official program shirt, duty pants, black belt, black boots or safety shoes, safety eye-wear, stethoscope, watch with second-hand, and transportation to clinical/internship site.

**Course Schedule:**
See attached Course Schedule
Course Learning Outcomes: **EMSP 2463 is the Capstone experience for the paramedic program.** Following is a comprehensive list of requirements, the terminal objectives of the paramedic education program. Student must meet or exceed these objectives to successfully complete the program. Measurement of these objectives will occur both during internship, the written exam, and as well as during the exit Mega-Code, as applicable.

### Paramedic Program Terminal Objectives, Capstone Experience:

Both Clinical and Internship unless otherwise noted:

(Form included in Clinical Packet, also see copy following this section)

**PSYCHOMOTOR SKILLS**

- The student will safely, and while performing all steps of each procedure:
  - Properly administer medications at least 15 times to live patients.
  - Successfully intubate at least 7 live patients.
    - At the discretion of the Medical Director, students may satisfy this requirement with a combination of 2 live and 5 simulator or cadaver intubations documented by a BHC-EMS instructor.
  - Successfully access the venous circulation at least 25 times on live patients of various age groups.
  - Ventilate at least 20 live patients of various age groups.
    - At the discretion of the Medical Director, students may satisfy this requirement with a combination of 3 live and 17 simulator ventilation procedures documented by a BHC-EMS instructor.

**AGES**

- The student will perform a comprehensive patient assessment on at least:
  - 30 pediatric patients (including newborns, infants, toddlers, and school age).
  - 50 adult patients with various chief complaints.
  - 30 geriatric patients.

**PATHOLOGIES**

- The student will perform a comprehensive patient assessment on at least:
  - 10 obstetric/gynecological patients.
  - 10 trauma patients.
  - 10 medical patients
  - 10 behavioral emergency/psychiatric patients.

**COMPLAINTS**

- The student will perform a comprehensive patient assessment, formulate and implement a treatment plan on at least:
  - 30 patients with chest pain.
  - 20 adult patients with dyspnea/respiratory distress (includes hyperventilation).
  - 10 pediatric patients (including infants, toddlers, and school age) with dyspnea/respiratory distress (includes hyperventilation).
  - 20 patients with abdominal complaints (for example: abdominal pain, nausea/vomiting, GI bleeding, gynecological complaint, etc.)
  - 30 patients with altered mental status or syncope (from any pathology).

**TEAM LEADER SKILLS**

- The student will serve as the team leader for at least 40 prehospital emergency responses.
**BROOKHAVEN COLLEGE EMS PARAMEDIC TERMINAL COMPETENCIES**  
(Aggregated from: Skill Training, EMSP 2260, 2261, and 2463)

<table>
<thead>
<tr>
<th>COMPETENCIES</th>
<th>TERMINAL BENCHMARK</th>
<th>ATTEMPTS</th>
<th>SUCCESSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medication administration</td>
<td>15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Endotracheal Intubation (2 live &amp; 5 simulator/cadaver)</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Venous Access</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ventilation/airway management (3 live &amp; 17 simulator)</td>
<td>20</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ASSESSMENTS BY AGE/CHIEF COMPLAINT (Quantity):**

<table>
<thead>
<tr>
<th>Category</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newborn</td>
<td>2</td>
</tr>
<tr>
<td>Infant</td>
<td>3</td>
</tr>
<tr>
<td>Toddler</td>
<td>3</td>
</tr>
<tr>
<td>Preschooler</td>
<td>2</td>
</tr>
<tr>
<td>School Aged Children</td>
<td>10</td>
</tr>
<tr>
<td>Adults</td>
<td>50</td>
</tr>
<tr>
<td>Geriatrics</td>
<td>30</td>
</tr>
<tr>
<td>Obstetric, GI/GU, Abdominal</td>
<td>10</td>
</tr>
<tr>
<td>Trauma</td>
<td>10</td>
</tr>
<tr>
<td>Medical</td>
<td>10</td>
</tr>
<tr>
<td>Behavioral Emergencies/Psychiatric</td>
<td>8 Adul/ 2 Pedi</td>
</tr>
</tbody>
</table>

**TREATMENT-MANAGEMENT BY PATHOLOGY**

<table>
<thead>
<tr>
<th>Category</th>
<th>ATTEMPTS</th>
<th>SUCCESSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chest Pain</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Respiratory [Pedi (10) Adult (20)]</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Syncope/ Altered Mental Status</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Abdominal / GI / GU / OB</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Team Leads</td>
<td>40</td>
<td></td>
</tr>
</tbody>
</table>

**Evaluation of Affective Behavior:**  
1-4 (Needs Improvement)  
5-7 (Average)  
8-10 (Competent)  
Comments:  

**Evaluation of Assessment/Interviewing:**  
1-4 (Needs Improvement)  
5-7 (Average)  
8-10 (Competent)  
Comments:  

**Evaluation of Psychomotor Skills:**  
1-4 (Needs Improvement)  
5-7 (Average)  
8-10 (Competent)  
Comments:  

Student Name: _____________________  
Student ID: ______________

Student Signature: ___________________________________  Date: ____________

Clinical Coordinator Signature: ________________________  Date: ____________

Affective Domain Evaluations:

Page 7 of 10
Upon successful completion of this program, the student will demonstrate attitudes and behaviors consistent with the ethics and professionalism expected of paramedics. The measures are as follows:

- **INTEGRITY**: Consistent honesty; being able to be trusted with the property of others; can be trusted with confidential information; complete and accurate documentation of patient care and learning activities.
- **EMPATHY**: Showing compassion for others; responding appropriately to the emotional response of patients and family members; demonstrating respect for others; demonstrating a calm, compassionate, and helpful demeanor toward those in need; being supportive and reassuring to others.
- **SELF – MOTIVATION**: Taking initiative to complete assignments; taking initiative to improve and/or correct behavior; taking on and following through on tasks without constant supervision; showing enthusiasm for learning and improvement; consistently striving for excellence in all aspects of patient care and professional activities; accepting constructive feedback in a positive manner; taking advantage of learning opportunities.
- **APPEARANCE AND PERSONAL HYGIENE**: Clothing and uniform is appropriate, neat, clean and well maintained; good personal hygiene and grooming.
- **SELF – CONFIDENCE**: Demonstrating the ability to trust personal judgment; demonstrating an awareness of strengths and limitations; exercises good personal judgment.
- **COMMUNICATIONS**: Speaking clearly; writing legibly; listening actively; adjusting communication strategies to various situations
- **TIME MANAGEMENT**: Consistent punctuality; completing tasks and assignments on time.
- **TEAMWORK AND DIPLOMACY**: Placing the success of the team above self interest; not undermining the team; helping and supporting other team members; showing respect for all team members; remaining flexible and open to change; communicating with others to resolve problems.
- **RESPECT**: Being polite to others; not using derogatory or demeaning terms; behaving in a manner that brings credit to the profession.
- **PATIENT ADVOCACY**: Not allowing personal bias to or feelings to interfere with patient care; placing the needs of patients above self interest; protecting and respecting patient confidentiality and dignity.
- **CAREFUL DELIVERY OF SERVICE**: Mastering and refreshing skills; performing complete equipment checks; demonstrating careful and safe ambulance operations; following policies, procedures, and protocols; following orders.

**MICU --- SCANS 1, 2, 3, 4, 5, 6, 7, 8**

At the completion of this unit, the paramedic student’s intended purpose of clinical internship is to capture the valuable collective experience that comes from actual interaction with real patients while being guided by experienced health care professionals. Students will be able to demonstrate the abilities to apply the knowledge learned in the classroom, laboratory, and clinical experiences to emergency patients in actual out-of-hospital scenes. Students will demonstrate the necessary caring, professional, accountable actions and attitudes necessary of an Emergency Public Service professional.

**Disciplinary Actions**

All interns must abide by the program, hospital, fire, and EMS department’s rules. The student’s attitudes, behaviors, demeanor, grooming, hygiene, and actions must be consistent with the ethics and professionalism expected of a public servant. Any rule violation, as determined by the faculty, charge nurse, or station’s officer is grounds for dismissal from the program may result in a failure of clinical and internship. If you are asked to leave the
hospital or fire/EMS station, you must leave immediately and not return unless specifically approved to do so by the BHC Clinical Coordinator. Contact the BHC Clinical Coordinator as soon as possible, ideally before the clinical/internship site representative. You will be afforded the opportunity to present your case at a meeting with the EMS Clinical Coordinator and the Program Director. The student must request this meeting within 48 hours of the incident or action will be taken with the facts and information known to the program’s administration. Their decision will be final. At their discretion should they deem the infraction as severe, the infraction will result in a dismissal from EMS Program, with notification letters forwarded to the Division Dean and the Vice-president of Student Affairs. Students that are afforded a reprieve and sent back to internships should understand the following: The 1st infraction will result in one, or more, of the following: probation status (which will specify expectations and possible additional disciplinary actions), one final letter grade lower, extra shifts, additional homework, volunteer work at a hospital/clinic/etc. An additional, i.e., the 2nd Infraction-will result in a dismissal from EMS Program.

Remediation:

Any unsatisfactory performance (*excluding dismissals for infraction of the Program’s Rules*) or failure to meet the necessary Terminal Competencies during clinical/internships will include the following:
Successful completion of up to 5 additional internship shifts at a location assigned by the BHC-EMS Clinical Coordinator.

These internship experiences must average at least 3 MICU runs per shift, with at least 5 patient assessments in the role of Team Leader. Alternatives may include assignments to specific hospital departments for a similar number of contact hours with specific patient types/ages/complaints and/or skills to be achieved and properly documented.
If the Terminal Competencies are still not met, or performance remains unsatisfactory, students may be required to complete, at the discretion of the Medical Director, any of the following performance evaluations: any pertinent National Registry skills station –such as Cardiac Dynamic & Static, scenarios, Mega-Code, etc. These evaluations will be done by the Medical Director, or his designee, at an EMS skills lab at Brookhaven College.

“NEED TO KNOW” INFO LINK FOR ALL STUDENTS

Spring 2015 Syllabus Addendum for Institutional Policies

Please click on this link: http://www.brookhavencollege.edu/about/vpi/Pages/Syllabus-Addendum.aspx
Read and sign this page. Then turn it in to your instructor.

I __________________________________ have read the course syllabus and understand what is required of me in this course. I have had the opportunity to ask the instructor questions about the syllabus.

__________________________________________
Print: Student Name

__________________________________________
Sign: Student Name

Date

Date