South Texas College Emergency Medical Services Program



EMS Student Handbook
2022

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South Texas College

Emergency Medical Services Program

STUDENT HANDBOOK

The South Texas College (STC) Emergency Medical Services Program reserves the right to make any revisions, deletions, or additions to the Student Handbook or the procedures found in the Student Handbook, Syllabi or Department website which, in the opinion of the faculty and/or South Texas College, serve in the best interest of the program and its students.

The Emergency Medical Services Program student is subject to the regulations in this handbook as well as the regulations and policies in the South Texas College Student Handbook and the Division of Nursing and Allied Health Student Handbook.

All applicants must meet the requirements for admission to South Texas College and the Emergency Medical Services Program.

Admission to the Emergency Medical Services Program does not guarantee eligibility for the National Registry of Emergency Medical Technicians (NREMT) examination or certification by the Texas Department of State Health Services.

Applicants seeking academic advisement prior to application are encouraged to visit with their EMS Program Advisors. To set an appointment contact (956) 872-3178. The South Texas College EMS Department is located on the East Wing, third floor of the Ramiro Casso Nursing Allied Health Building A, located at 1101 East Vermont in McAllen, Texas.

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 EMS Program website to obtain current program information at https://nah.southtexascollege.edu/EMS/.

The Program Coordinator and the Medical Director are the only entities that can clear a student for examination with the NREMT.

DEPARTMENT GOAL:

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

PROGRAM OVERVIEW

Welcome to the South Texas College Emergency Medical Services Program formally known as the Emergency Medical Technology Program. In the early 1990's, it was recognized that national trends in EMS education were moving towards higher-level education along with expanding the paramedic program content areas. This initiative created the foundation for providing EMS education through a branch from Texas State Technical Institute (TSTI). Furthermore, in the early 90s, EMS training was only offered in Brownsville through Texas Southmost College and in Harlingen through TSTI. Students from Hidalgo and Starr Counties had to travel to Cameron County or wait until one of the two programs offered a course in McAllen to receive EMS Training. The move from Adult Continuing Education Paramedic training programs to a college-based EMS education program allowed a larger region to be served while increasing the number of students trained in EMS. TSTI became TSTC and started offering EMS courses from their Harlingen main campus then later from their McAllen campus under the direction of Ken Anderson, serving as Program Chair. On September 1, 1993, the Emergency Medical Services Program was created through the Texas Senate Bill 251 that granted South Texas College (STC) the ability to teach EMS in the Hidalgo and Starr Counties. The EMS program at STC became one of the first two AAS degrees approved by the Texas Higher Education Coordinating Board to be offered by the College.

An Associate of Applied Science will allow Students to:

- Experience college level courses designed for paramedic education based on national EMS education trends and a national curriculum.
- Attain Texas paramedic licensure upon successful completion of the Emergency Medical Services Associate of Applied Science degree and Texas Department of State Health Services licensure requirements.
- Take advantage of the Paramedic to RN track offered at STC Nursing Department.

The STC EMS program prepares students to apply for and successfully meet the requirements of the Texas Department of State Health Services EMS certification at all levels. EMT Basic and Advanced EMT (AEMT) courses at South Texas College are conducted at all campuses including the Mid Valley, Starr County campuses, and in the Nursing and Allied Health (NAH) Building located in McAllen's District. However, paramedic courses are offered only at the NAH in McAllen Texas. Although some students choose to obtain only a paramedic certificate, they have the option of finishing with an AAS. All students must meet the criteria for enrollment at each level.

EMERGENCY MEDICAL TECHNICIAN BASIC

The first semester consists of a curriculum designed for EMT-Basic students. Instruction at the basic level will serve as a foundation for the AEMT and Paramedic levels, as well as concentrating on learning general anatomy and physiology along with general patient assessment. Students will learn and practice lifesaving procedures such as oxygen administration, spinal motion restriction, bandaging, splinting, and administration of certain medications. Once all competencies have been successfully met, students will be eligible to take the National Registry of Emergency Medical Technicians (NREMT) Basic exam. Successful completion of the NREMT exam will make a student eligible to apply for the Texas Department of State Health Services (DSHS) Basic Certification.

Entry into the EMS Basic program must meet the following:

- Participate in the Prospective Student Information Session.
- Be admitted to college as a high school graduate or GED equivalent, except for dual credit students.
- EMT-Basic Certificate TSI exempt.
- Earn a minimum cumulative GPA of 2.0 on a 4.0 scale for all courses completed at STC or, if currently a high school student, a minimum cumulative GPA of 2.0 on a 4.0 scale on the high school transcript.

- Be 18-years of age to be eligible for certification by the Texas Department of State and Health Services or National Registry.
- Hold a valid Texas Driver's License or Texas ID.
- Clinical/Practicum Requirements (Complio)
 Pass a criminal background check, 10-panel drug screen, current CPR status, current accident/health insurance and complete all required immunizations including Hepatitis B series. https://nah.southtexascollege.edu/clinical_affairs.html
- If you have a criminal record and would like to be evaluated for eligibility, contact the Department of State Health Service Office of EMS and Trauma Systems Coordination 512-834-6740 for more information. The Petition for EMS Criminal History Pre-Screening form and the Texas Fingerprint Service Code form are available at www.dshs.state.tx.us/emstraumasystems/formsresources.shtm.
- Submit a completed program application.
- Meet the technical standards of the program.

ADVANCED EMERGENCY MEDICAL TECHNICIAN (AEMT)

At the AEMT level, students will continue to use the competencies they learned as an EMT Basic while continuing to study patient assessment, anatomy and physiology of the circulatory system and the respiratory system in depth. AEMT students will practice, master competencies, and perform advanced invasive lifesaving procedures such as intravenous (IV) administration and advanced airways throughout the course. Once all competencies have been successfully met, students will be eligible to take the NREMT AEMT exam. Successful completion of the NREMT exam will make a student eligible to apply for the DSHS AEMT Certification.

Entry into the AEMT program must meet the following:

- Successful completion of the EMTB STC curriculum.
- Documentation of current EMTB certification (DSHS) or NREMT Basic certification.
- Participate in the Prospective Student Information Session.
- Be admitted to college as a high school graduate or GED equivalent, except for dual credit students.
- Advanced EMT Certificate TSI exempt.
- Earn a minimum cumulative GPA of 2.0 on a 4.0 scale for all courses completed at STC or, if currently a high school student, a minimum cumulative GPA of 2.0 on a 4.0 scale on the high school transcript.

- Be 18-years of age to be eligible for certification by the Texas Department of State and Health Services or National Registry.
- Hold a valid Texas Driver's License or Texas ID.
- Clinical/Practicum Requirements (Complio)
 Pass a criminal background check, 10-panel drug screen, current CPR status, current accident/health insurance and complete all required immunizations including Hepatitis B series. https://nah.southtexascollege.edu/clinical_affairs.html
- If you have a criminal record and would like to be evaluated for eligibility, contact the Department of State Health Service Office of EMS and Trauma Systems Coordination 512-834-6740 for more information. The Petition for EMS Criminal History Pre-Screening form and the Texas Fingerprint Service Code form are available at www.dshs.state.tx.us/emstraumasystems/formsresources.shtm.
- Submit a completed program application.
- Meet the technical standards of the program.

PARAMEDIC

The Paramedic level is the highest level offered at STC for EMS. At the Paramedic level, students will concentrate on successfully performing comprehensive patient assessments and learn advanced medical skills such as electrocardiogram interpretation and treatment. The paramedic student will also learn and administer the most current trends in pharmacology treatments, along with demonstrating the proper use of the Advanced Cardiac Life Support protocols.

Students will be prepared for both the cognitive and psychomotor examinations by the NREMT by the completion of the paramedic program. These exams measure proficiency and competency in the standards set by the DSHS using the NREMT examination process. Once all competencies have been successfully met, paramedic students will be eligible to take the NREMT paramedic psychomotor and cognitive exams. Successful completion of the NREMT exams will make a student eligible to apply for the DSHS AEMS Certification

Entry into the Paramedic program must meet the following:

- Successful completion of the EMTB and AEMT STC curriculum or equivalent college credits.
- Documentation of current EMTB certification (DSHS) or NREMT Basic certification.
- Completion of BIOL 2401 and BIOL 2402 with a C or Better

- Upon completion of the application requirements, prospective candidates will be scheduled for an interview process.
- Participate in the Prospective Student Information Session.
- Be admitted to the college as a high school graduate or GED equivalent, except for dual credit students.
- Paramedic Certificate or AAS Degree Option: Meet TSI College Readiness Standards or meet TSI exemption standards.
- Earn a minimum cumulative GPA of 2.0 on a 4.0 scale for all courses completed at STC or, if currently a high school student, a minimum cumulative GPA of 2.0 on a 4.0 scale on the high school transcript.
- Be 18-years of age to be eligible for certification by the Texas Department of State and Health Services or National Registry.
- Hold a valid Texas Driver's License or Texas ID.
- Clinical/Practicum Requirements (Complio)
 Pass a criminal background check, 10-panel drug screen, current CPR status, current accident/health insurance and complete all required immunizations including Hepatitis B series. https://nah.southtexascollege.edu/clinical_affairs.html
- If you have a criminal record and would like to be evaluated for eligibility, contact the Department of State Health Service Office of EMS and Trauma Systems Coordination 512-834-6740 for more information. The Petition for EMS Criminal History Pre-Screening form and the Texas Fingerprint Service Code form are available at www.dshs.state.tx.us/emstraumasystems/formsresources.shtm.
- Submit a completed program application.
- Meet the technical standards of the program.
- Take a Paramedic Entrance Exam that will be used as a diagnostic tool to assess strengths and weaknesses prior to the start of the course.

EMS Associate of Applied Science candidates: Courses taken for the certificate program may be applied toward completion of the two-year Associate of Applied Science Degree in Emergency Medical Services. Upon completion of the degree, the student is eligible to apply to DSHS as a Licensed Paramedic.

All EMS labs and Clinical/Practicum are designed to promote the learning and application of clinical skills. These are also required as part of the EMS, AEMS, and Paramedic courses. They will provide exceptional opportunities for Students to learn and apply clinical skills in the hospital and pre-hospital environments.

FACULTY AND STAFF

MEDICAL DIRECTOR

Andrew Levine, MD.

FACULTY AND STAFF

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The Curriculum Vitae for South Texas College EMS Faculty instructors can be found on this link, Click here.

LICENSURE, REGULATIONS, ACCREDITATION

- 1. STC EMS program is officially approved and regulated by the Texas Department of State Health Services EMS and Trauma Systems.
- 2. South Texas College is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).
- 3. Program Chair, Faculty/instructors are certified by the Texas Department of State Health Services EMS and Trauma Systems.

CLINICAL AFFAIRS SPECIALIST

Students must be cleared by the Nursing Allied Health Clinical Affairs Specialist through **Complio** prior to entering program. Complio is American Data Bank's comprehensive tool for student screening and compliance. It is the students' responsibility to make sure they are compliant. Failure to do so may constitute students being dropped from the program. The signup is found at https://nah.southtexascollege.edu/clinical_affairs.html

COURSE SCHEDULES

At the beginning of each semester, Students are provided with a course syllabus that can be found in their classes on Blackboard. 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 possible. Special classes, meeting days, when applicable, are identified in the syllabus.

Students are not allowed to change or switch schedules. If a student's schedule requires any change, it must be reviewed and approved by the Course Instructor and Program Chair. Note: if schedule changes are required and approved, the schedule change may involve switching all classes and sections. This process will require proper college documentation at your own expense.

PROGRAM COMPLETION

EMS Program Students are informed of the course completion requirements at the beginning of each course. Students must meet all academic and clinical course requirements 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 EMS course and to complete the specific program. Specific grading procedures for EMS courses are discussed in the Course Procedures section of this handbook. To be eligible to take the National Registry certification exam (Basic, AEMT or Paramedic), Students must pass the appropriate course and receive the approval of the course instructor, Department Chair and Coordinator. Completion of the paramedic program also requires the unanimous approval of the course instructor, department chair, clinical coordinator, primary clinical preceptor, and the medical director. Clinical rotations must also be successfully completed including submission of the required documentation prior to established deadlines. Most importantly, the student must have successfully demonstrated competency in all required clinical content areas. Oral and written examinations and other required assignments must also be successfully completed to continue in the paramedic program.

GRADING CRITERIA

LAB GRADING

Students must have successfully demonstrated mastery of all competencies in all required skills and mega codes for the lab portion. Evaluations will be given a **Pass or Fail** as defined on skills sheets. Students that receive a **Fail** for the laboratory portion of the class will not be eligible for course completion.

LECTURE GRADING

Student's grades will be based upon final exams, exams, quizzes, and assignments.

LECTURE AND LAB

A student may receive a passing letter grade for lecture but still fail the lab thus not passing the course.

LETTER GRADES

92 - 100 = A

86 - 91 = B

80 - 85 = C*

70 - 79 = D

0 < 69 = F

BASIS FOR DETERMINATION OF FINAL GRADE

Student must achieve a grade of 80.0 or better in all the classes of the course (lecture, lab, clinical and practicum). Theory knowledge is evaluated by written examinations, quizzes, assignments, psychomotor skills exams, mega code, and other methods determined by program. The numerical equivalent is rounded up starting at 0.5 to the nearest whole number. For example, 79.5 would be 80, and 79.4 remains a 79.

The National Safety Council (NSC) grading criteria for CEVO is determined by the NSC to attain certification. Passing score is an 80% to fulfill certification requirements.

^{*} Please note that unlike traditional courses an **80** is a **C** in the EMS Program.

Other certification courses affiliated with the program are subject to that entity's passing criteria in order to attain certification.

REMEDIATION PROCESS

Lecture-

A student that receives less than an 80% on any exam and/or fails a skills exam will require remediation. The faculty will do a written referral to the Guided Pathway Specialist/ Student Success Specialist with a copy to the Center for Learning Excellence (CLE). The original copy will be returned by the student to the faculty within five (5) business days with paperwork from each resource. Every student will complete Learning Style Inventory (LSI) at the discretion of the Guided Pathway Specialist/ Student Success Specialist. To include one or more of the following.

- Reading studying and time management strategies
- Exam Preparation Tips & Test- Taking Strategies
- Study Tips & Note-Taking Strategies
- Time Management Strategies

Lab-

Any failure of the skills exams will require a remediation assignment to be completed at the instructor's discretion.

All remediation assignment(s) must be completed and submitted to the instructor before the next exam date. Failure to comply will deem student ineligible to take the upcoming exam and the student will receive a zero "0" for a grade.

After additional unsuccessful attempts on any another exam (where the student receives less than an 80%), the previously mentioned process will be repeated. In addition to the above process, the student will be required to complete a remediation learning objective assignment deemed appropriate by the course instructor.

The above remediation process extends on to lab, clinical and practicum assignments issued by each respective course instructor.

EXAMS

Examination formats may include paper or electronic mediums with the use of lockdown browser with webcam monitoring at the instructor's discretion.

Online based exams require reliable internet connection.

Exam reviews are a privilege and can be ended at any time at the instructor's discretion.

Exam reviews are done within one week of the exam. The purpose of exam review is to provide the student with the correct rationale for questions that the student missed or does not understand. NO NOTE TAKING OR ELECTRONIC DEVICES will be allowed during an exam review. Exam review durations will last as long as the instructors' discretion deems necessary. If you need further clarification, you must make an appointment with your instructor within one week of the exam. There will be no group review of the Final Exam.

ABSENCES DURING EXAMINATION

If you are absent for a scheduled exam, you must follow the policy outline in the *Student Handbook-Associate Degree Program* to be eligible for a make-up exam. The instructor MUST be notified of your absence at least one hour before the scheduled exam time or you will automatically receive a "zero" on the missed exam. Make-up exams are to be taken at a time scheduled by the instructor, but should be taken prior to the next class day. Make-up exams may or may not be in the same format as the original exam. No electronic devices during testing are permitted, but a calculator may be enabled through the toolbar during testing.

Students must take examinations at their scheduled time and date. No make-up examination will be given if students do not notify the course instructor before the scheduled start time for the examination. Documentation must be submitted to the course instructor regarding and justifying the absence. Make up examinations must be completed before students return to the classroom. The type of exam may differ from the original exam, i.e., an essay exam instead of multiple choice.

MEDICATION STUDY LISTS

The following list includes the names of medications that will be discussed in the EMS-Basic, AEMS and Paramedic Programs. Students are expected to obtain a working knowledge of each medication. Scheduled quizzes are provided to assess the student's knowledge of each medication. Occasionally, additional medications will be added to this list based upon current medical practice and/or updated EMS applicability.

EMT BASIC PROGRAM

Oxygen
Oral Glucose
Activated Charcoal
Albuterol (Proventil) (metered dose inhaler and small volume nebulizer) Assisted
Aspirin
Epinephrine (Epi-Pen) Assisted
Nitroglycerin Assisted
Naloxone intranasal

AEMT PROGRAM

(Including EMT-B medications)

Albuterol
Dextrose 50%, 25% and 10%
Epinephrine
Glucagon
Naloxone

Thiamine
Diphenhydramine
Nitrous Oxide
Mark 1 Nerve Agent Antidote Kit
IV Solutions (Lactated Ringer's, Normal Saline, D5W)

PARAMEDIC PROGRAM

(Includes EMT-B and AEMS)

Aminophylline (Somophyllin)	Lidocaine (Xylocaine)
Atropine Sulfate	Magnesium Sulfate
Bretylium Tosylate (Bretylol)	Methylprednisolone (Solu-Medrol)
Calcium Chloride	Midazolam (Versed)
Diazepam (Valium)	Morphine Sulfate
Diltiazem (Cardizem)	Nifedipine (Procardia, Adalat)
Dobutamine (Dobutrex)	Nitroglycerin (Nitrostat, Nitro-Bid)
Dopamine (Intropin)	Norepinephrine (Levophed)
Epinephrine, 1:1,000	Nalbuphine (Nubain)
Epinephrine, 1:10,000	Oxytocin (Pitocin)
Furosemide (Lasix)	Procainamide (Pronestyl)
Glucagon Reteplase (Retevase)	Promethazine (Phenergan)

Haloperidol (Haldol)	Racemic Epinephrine (microNefrin)
Ipratropium (Atrovent)	Sodium Bicarbonate
Fentanyl	Succinylcholine (Anectine)
Terbutaline (Brethine, Bricanyl)	Verapamil (Calan)
Heparin	Amiodarone
Flumazenil (Romazicon)	

^{*}Refer to the Textbook or supplemental information provided by the instructor for study information.

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 are 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 advanced skills. The laboratory skills sheet must be successfully completed prior to the student being allowed to utilize the skill in the clinical setting. Each Student must then demonstrate mastery of each skill during the clinical rotations. If the student does not successfully complete all their competencies within the required time frames, the student will be *dropped* from the program.

Students may be introduced to additional clinical skills and procedures not included in the lists below. Students will not be required to show skills proficiency verification of these additional skills. 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 additional skills.

^{*}Additional medications may be added at the instructor's discretion as local EMS protocols evolve.

I. SKILL – AIRWAY/VENTILATION/OXYGENATION				
I. Skill – Airway / Ventilation / Oxygenation	EMR	EMT	AEMT	Paramedic
Airway – nasal		X	X	X
Airway – oral	X	X	X	X
Airway – supraglottic			X	X
Bag-valve-mask (BVM)	X	X	X	X
СРАР		X	X	X
Chest decompression - needle				X
Chest tube placement – assist only				X
Chest tube – monitoring and management				X
Cricothyrotomy				X
End tidal CO2 monitoring and interpretation of waveform capnography			X	X
Gastric decompression – NG Tube				X
Gastric decompression – OG Tube				X
Head tilt - chin lift	X	X	X	X

Endotracheal intubation				X
Jaw-thrust	X	X	X	X
Mouth-to-barrier	X	X	X	X
I. Skill – Airway / Ventilation / Oxygenation	EMR	ЕМТ	AEMT	Paramedic
Mouth-to-mask	X	X	X	X
Mouth-to-mouth	X	X	X	X
Mouth-to-nose	X	X	X	X
Mouth-to-stoma	X	X	X	X
Airway Obstruction – dislodgement by direct laryngoscopy				X
Airway Obstruction – manual dislodgement techniques	X	X	X	X
Oxygen therapy – High flow nasal cannula				X
Oxygen therapy – Humidifiers		X	X	X
Oxygen therapy – Nasal cannula	X	X	X	X
Oxygen therapy – non- rebreather mask	X	X	X	X
Oxygen therapy – partial rebreather mask		X	X	X
Oxygen therapy – simple face mask		X	X	X

Oxygen therapy – Venturi mask		X	X	X
Pulse oximetry		X	X	X
Suctioning – Upper airway	X	X	X	X
Suctioning – tracheobronchial of an intubated patient			X	X
II. SKILL – CARDIOVA	SCUL	AR/CI	RCULA'	TION
II. Skill – Cardiovascular / Circulation	EMR	EMT	AEMT	Paramedic
Cardiopulmonary resuscitation (CPR)	X	X	X	X
Cardiac monitoring – 12 lead ECG acquisition and transmission		X	X	X
Cardiac monitoring – 12 lead electrocardiograms (interpretive)				X
II. Skill – Cardiovascular / Circulation	EMR	ЕМТ	AEMT	Paramedic
Cardioversion – electrical				X
Defibrillation – automated / semi- automated	X	X	X	X
Defibrillation – manual				X
Hemorrhage control – direct pressure	X	X	X	X
Hemorrhage control – tourniquet	X	X	X	X

Hemorrhage control – wound packing	X	X	X	X
Transvenous cardiac pacing – monitoring and maintenance				X
Mechanical CPR device		X	X	X
Telemetric monitoring devices and transmission of clinical data, including video data		X	X	X
Transcutaneous pacing				X
III. SKILL – SPLINTING, SPINAL MOTION RESTRICTION (SMR), AND PATIENT RESTRAINT				
III. Skill – Splinting, Spinal	EMR	EMT	AEMT	Paramedic
Motion Restriction (SMR), and Patient Restraint				
	X	X	X	X
Patient Restraint	X	X	X X	X X
Patient Restraint Cervical collar	X			
Patient Restraint Cervical collar Long spine board		X	X	X
Patient Restraint Cervical collar Long spine board Manual cervical stabilization		X	X	X
Patient Restraint Cervical collar Long spine board Manual cervical stabilization Seated SMR (KED, etc.) Extremity stabilization -	X	X X X	X X X	X X X
Patient Restraint Cervical collar Long spine board Manual cervical stabilization Seated SMR (KED, etc.) Extremity stabilization - manual	X	X X X	X X X	X X X

III. Skill – Splinting, Spinal Motion Restriction (SMR), and Patient Restraint	EMR	ЕМТ	AEMT	Paramedic	
Emergency moves for endangered patients	X	X	X	X	
IV. SKILL – MEDICATION ADMINISTRATION – ROUTES					
IV. Skill – Medication Administration – Routes	EMR	ЕМТ	AEMT	Paramedic	
Aerosolized/nebulized		X	X	Х	
Endotracheal tube				X	
Inhaled		X	X	X	
Intradermal				X	
Intramuscular			X	X	
Intramuscular – auto-injector	X	X	X	X	
Intranasal			X	X	
Intranasal - unit-dosed, premeasured	X	X	X	X	
Intraosseous – initiation, peds or adult			X	X	
Intravenous			X	X	
Mucosal/Sublingual		X	X	X	
Nasogastric				X	
Oral		X	X	X	

Rectal				X
Subcutaneous			X	X
Topical				X
Transdermal				X
V. MEDICAL DIRECTOR	APPRO	OVED	MEDICA	ATIONS
V. Medical Director Approved Medications	EMR	ЕМТ	AEMT	Paramedic
Use of epinephrine (auto- injector) for anaphylaxis (supplied and carried by the EMS agency)		X	X	X
Use of auto-injector antidotes for chemical/hazardous material exposures	X	X	X	X
Use of opioid antagonist auto- injector for suspected opioid overdose	X	X	X	X
Immunizations			X	X
Inhaled – beta agonist/bronchodilator and anticholinergic for dyspnea and wheezing		X	Х	X
Inhaled – monitor patient administered (i.e., nitrous oxide)			X	X
Intranasal - opioid antagonist for suspected opioid overdose	X	X	X	X
Intravenous			X	X

Maintain an infusion of blood or blood products			X
Oral aspirin for chest pain of suspected ischemic origin	X	X	X
Oral glucose for suspected hypoglycemia	X	X	X
Oral over the counter (OTC) analgesics for pain or fever	X	X	X
OTC medications, oral and topical			X
Parenteral analgesia for pain		X	X
Sublingual nitroglycerin for chest pain of suspected ischemic origin – limited to patient's own prescribed medication	X		
Sublingual nitroglycerin for chest pain of suspected ischemic origin		X	X
Thrombolytics			X

Limited to analgesia, antinausea/antiemetic, dextrose, epinephrine, glucagon, naloxone, and others defined by state/local protocol.

VI. SKILL – IV INITIATION/MAINTENANCE FLUIDS

VI. Skill – IV Initiation/Maintenance Fluids	EMR	EMT	AEMT	Paramedic
Access indwelling catheters and implanted central IV ports				X
Central line – monitoring				X

Intraosseous – initiation, peds or adult			X	X
Intravenous access			X	X
Intravenous initiation - peripheral			X	X
Intravenous – maintenance of non- medicated IV fluids			X	X
Intravenous – maintenance of medicated IV fluids				X
VII. SKILL – M	ISCEL	LANE	OUS	
VII. Skill – Miscellaneous	EMR	EMT	AEMT	Paramedic
Assisted delivery (childbirth)	X	X	X	X
Assisted complicated delivery (childbirth)		X	X	X
Blood chemistry analysis				X
Blood chemistry analysis Blood pressure automated		X	X	X X
	X	X	X	
Blood pressure automated	X			X
Blood pressure automated Blood pressure – manual	X	X	X	X X
Blood pressure automated Blood pressure – manual Blood glucose monitoring		X	X	X X X
Blood pressure automated Blood pressure – manual Blood glucose monitoring Eye irrigation Eye irrigation –hands free irrigation using sterile eye		X	X	X X X

Mega-codes		X
Exit Mega-code given by a panel of EMS faculty (may be audio and video recorded for evaluation and education purposes).		X
Pediatric Assessment (All Age Groups)		X
Out of Hospital Scenario		X

COMMISSION ON ACCREDITATION OF ALLIED HEALTH EDUCATION PROGRAMS (COAEMSP)

CoAEMSP requires "**Student Patient Contact Matrix** formally known as **Appendix G**" for reporting clinical and field experiences in self-studies (Paramedic Student). Click on the link to download the requirements in excel format.

Student Patient Contact Matrix - CoAEMSP

COURSE PROCEDURES AND REGULATIONS

Each Student is required to sign a Student Acknowledgment Agreement Form of the handbook and class syllabus. The EMS Program Faculty and Staff strongly believe that the student will be most successful if he/she completely understands these procedures and regulations. Should a student have any questions or concerns regarding a course procedure and regulations, he/she should discuss them with the course's faculty instructor.

STUDENT RIGHTS AND RESPONSIBILITIES

As a premier learning-center of higher education, South Texas College is committed to academic integrity and standards of excellence of the highest quality in all courses and programs and to providing an environment that fosters the educational process and the well-being of the campus community. South Texas College recognizes that student success is a shared responsibility between the student and the College.

Students attending South Texas College are expected to accept and adhere to the following responsibilities:

- 1. Student attendance and participation is paramount to academic success. Regular and punctual attendance in class and laboratories is expected of all students.
- 2. Students are expected to exercise personal responsibility and self-discipline as they engage in the rigors of discovery and scholarship. Inappropriate behavior may result in disciplinary action against the student.
- 3. Students attending South Texas College are responsible for adhering to the standards of academic integrity. Academic dishonesty may result in disciplinary action against the student.

In support of the rights of its students, South Texas College is committed to:

- 1. A consistent and fair evaluation of student performance and an impartial process for grade appeals that allows students to appeal academic decisions or actions which they consider manifestly unjust or improper.
- 2. Ensuring that students are treated with fundamental fairness and personal dignity that includes an impartial process for students to appeal disciplinary sanctions imposed by the College or to file a complaint or grievance when they believe that they were unjustly or improperly treated by the College, College employees, or other students.

Detailed information regarding South Texas College's expectations for students is presented in the Student Code of Conduct. The Student Code of Conduct is an articulation of South Texas College's commitment to maintaining an environment that recognizes and supports the rights of its students and provides a guide for defining behaviors the College considers inappropriate.

TECHNICAL PERFORMANCE STANDARDS

Modern day Emergency Medical Services has been involved from the days of "Ambulance Driver "to highly trained and skilled medical professionals. Throughout the years, Emergency Medical Technician-Basic, Advance-Emergency Medical Technician, and Paramedics have provided life-saving care to patients whether from a person having a heart attack at their residence or dealing with a person in shock from a automobile accident. Due to the profession, people's lives are at stake, so quick reaction and competent care must be provided by EMS. The rapidness that comes from treating patients, students must be able to function in a manner that may not be suitable for all. For this reason, students must meet technical performance standards that come with providing care. In the following table, a general summary of the technical standards is provided. We strongly encourage the student to review in full the Functional Job Analysis that is on behalf of the National Highway Traffic Safety Administration (NHTSA). You can click here to download the information from the NHTSA-EMS website.

READ	Ability to read and understand printed materials used in the classroom and healthcare settings such as textbooks, signs, medical supply packages, policy and procedure manuals and patient records.
ARITHMATIC COMPETENCE	Read and understand columns of numbers and measurement marks, count rates, tell time, use measuring tools, write numbers in records, and calculate (add, subtract, multiply, divide) mathematical information such as fluid volumes, weights and measurements and vital signs.
ANALYTICAL THINKING	Ability to acquire and apply information from classroom instruction, skills laboratory experiences, independent learning and group projects. Demonstrate skills for memorization, integration of concepts, abstract reasoning, multifactorial problem solving and interpreting.
COMMUNICATIO N	Ability to communicate effectively in English in oral and written form with peers and instructors to complete assignments and tests, give directions, explain procedures, give oral reports, speak on the telephone and interact with others and document care. Ability to comprehend, interpret, and follow oral and written instructions. Communicate in a clear and concise manner with patients of all ages, including obtaining health history and other pertinent information.
INTERPERSONAL SKILLS	Establish rapport with peers, patients/ clients, and instructors, respect individual differences and negotiate interpersonal conflicts.
EMOTIONAL STABILITY	Focus attention on task, monitor own emotions, perform multiple responsibilities concurrently, deal with the unexpected, handle strong emotions (i.e., grief, revulsion), and function as part of a team (ask advice, seek information, and share). Provide emotional support to patients before, during and after their radiographic procedures.
FINE MOTOR	Manual dexterity is necessary to palpate muscles and/or bony prominences, pick up objects with hands, grasp small objects, write with pen or pencil and squeeze fingers.

PHYSICAL ENDURANCE	Stand and maintain balance during classroom or therapeutic procedure. Endure an eight-hour clinical day with a minimum of 4 to 6 hours of standing or walking. Bend, lift, turn, grasp and squat with full range of motion.
PHYSICAL MOBILITY	Walk, reach arms above head and below waist, stoop/twist body, kneel, squat, move quickly (respond to emergency).
PHYSICAL STRENGH	Move objects independently weighing up to 125 pounds, move heavy objects (up to 50 lbs.), squeeze with hands, use upper body strength (CPR, patient handling). Transport, move lift or transfer patients from a wheelchair to a stretcher to an exam table or to a patient's bed. Move, adjust and manipulate a variety of medical equipment to perform examinations according to established procedures.
VISUAL	Ability to read fine print on measuring devices and computer screens, see objects more than 20 feet away recognize depths and use peripheral vision. Visually monitor patients, charts and machine indicator lights in dimly lit conditions.
AUDITORY	Hear auditory alarms and normal speaking level sounds.
SMELL	Detect odors from clients, smoke, gases or noxious smells.
TACTILE	Feel vibrations (palpate pulse), detect temperature (skin, solutions), and detect environmental temperature (drafts, cold and hot).

PARAMEDIC FUNCTIONAL JOB ANALYSIS

Paramedic Characteristics

The Paramedic must be a confident leader who can accept the challenge and high degree of responsibility entailed in the position. The Paramedic must have excellent judgement and be able to prioritize decisions and act quickly in the best interest of the patient, must be self-disciplined, able to develop patient rapport, interview hostile patients, maintain safe distance, and recognize and utilize communication unique to diverse multicultural groups and ages within those groups. Must be able to function independently at optimum level in a non-structured environment that is constantly changing.

Even though the Paramedic is generally part of a two-person team generally working with a lower skill and knowledge level Basic EMT, it is the Paramedic who is held responsible for safe and therapeutic administration of drugs including narcotics. Therefore, the Paramedic must not only have knowledge about medications but must be able to apply this knowledge in a practical sense. Knowledge and practical application of medications include thoroughly knowing and understanding the general properties of all types of drugs including analgesics, anesthetics, anti-anxiety drugs, sedatives and hypnotics, anticonvulsants, central nervous stimulants, psychotherapeutics which include antidepressants, and other anti-psychotics, anticholerginics, cholergenics, muscle relaxants, anti-dysrhythmics, anti-hypertensives, anticoagulants, diuretics, bronchodilators, Opthalmics, pituitary drugs, gastro-intestinal

drugs, hormones, antibiotics, antifungals, anti-inflammatories, serums, vaccines, antiparasitic, and others. The Paramedic is personally responsible, legally, ethically, and morally for each drug administered, for using correct precautions and techniques, observing and documenting the effects of the drugs administered, keeping one's own pharmacological knowledge base current as to changes and trends in administration and use, keeping abreast of all contraindications to administration of specific drugs to patients based on their constitutional make-up, and using drug reference literature. The responsibility of the Paramedic includes obtaining a comprehensive drug history from the patient that includes names of drugs, strength, daily usage and dosage. The Paramedic must take into consideration that many factors, in relation to the history given, can affect the type of medication to be given. For example, some patients may be taking several medications prescribed by several different doctors and some may lose track of what they have or have not taken. Some may be using nonprescription/over the counter drugs. Awareness of drug reactions and the synergistic effects of drugs combined with other medicines and in some instances, food, is imperative. The Paramedic must also take into consideration the possible risks of medication administered to a pregnant mother and the fetus, keeping in mind that drugs may cross the placenta. The Paramedic must be cognizant of the impact of medications on pediatric patients based on size and weight, special concerns related to newborns, geriatric patients and the physiological effects of aging such as the way skin can tear in the geriatric population with relatively little to no pressure. There must be an awareness of the high abuse potential of controlled substances and the potential for addiction, therefore, the Paramedic must be thorough in report writing and able to justify why a particular narcotic was used and why a particular amount was given. The ability to measure and re-measure drip rates for controlled substances/medications is essential. Once medication is stopped or not used, the Paramedic must send back unused portions to proper inventory arena.

The Paramedic must be able to apply basic principles of mathematics to the calculation of problems associated with medication dosages, perform conversion problems, differentiate temperature reading between centigrade and Fahrenheit scales, be able to use proper advanced life support equipment and supplies (i.e. proper size of intravenous needles) based on patient's age and condition of veins, and be able to locate sites for obtaining blood samples and perform this task, administer medication intravenously, administer medications by gastric tube, administer oral medications, administer rectal medications, and comply with universal pre-cautions and body substance isolation, disposing of contaminated items and equipment properly. The Paramedic must be able to apply knowledge and skills to assist overdosed patients to overcome trauma through antidotes and have knowledge of poisons and be able to administer treatment. The Paramedic must be knowledgeable as to the stages drugs/medications go through once they have entered the patient's system and be cognizant that route of administration is critical in relation to patient's needs and the effect that occurs. The Paramedic must also be capable of providing advanced life support emergency medical services to patients including conducting of and interpreting electrocardiograms (EKGs),

electrical interventions to support the cardiac functions, performing advanced endotracheal intubations in airway management and relief of pneumothorax and administering of appropriate intravenous fluids and drugs under direction of off-site designated physician. The Paramedic is a person who must not only remain calm while working in difficult and stressful circumstances but must be capable of staying focused while assuming the leadership role inherent in carrying out the functions of the position. Good judgement along with advanced knowledge and technical skills are essential in directing other team members to assist as needed. The Paramedic must be able to provide top quality care, concurrently handle high levels of stress, and be willing to take on the personal responsibility required of the position. This includes not only all legal ramifications for precise documentation, but also the responsibility for using the knowledge and skills acquired in real life-threatening emergency situations. The Paramedic must be able to deal with adverse and often dangerous situations which include responding to calls in districts known to have high crime and mortality rates. Self-confidence is critical, as is a desire to work with people, solid emotional stability, a tolerance for high stress, and the ability to meet the physical, intellectual, and cognitive requirements demanded by this position. Physical Demands Aptitudes required for work of this nature are good physical stamina, endurance, and body condition that would not be adversely affected by frequently having to walk, stand, lift, carry, and balance at times, in excess of 125 pounds. Motor coordination is necessary because over uneven terrain, the patient's, the Paramedic's, and other workers' well-being must not be jeopardized.

Comments The Paramedic provides the most extensive pre-hospital care and may work for fire departments, private ambulance services, police departments or hospitals. Response times for the nature of work are dependent upon nature of call. For example, a Paramedic working for a private ambulance service that transports the elderly from nursing homes to routine medical appointments and check-ups may endure somewhat less stressful circumstances than the Paramedic who works primarily with 911 calls in districts known to have high crime rates. Thus, the particular stresses inherent in the role of the Paramedic can vary, depending on place and type of employment. However, in general, in the analyst's opinion, the Paramedic must be flexible to meet the demands of the ever-changing emergency scene. When emergencies exist, the situation can be complex, and care of the patient must be started immediately. In essence, the Paramedic in the EMS system uses advanced training and equipment to extend emergency physician services to the ambulance. The Paramedic must be able to make accurate independent judgements while following oral directives. The ability to perform duties in a timely manner is essential, as it could mean the difference between life and death for the patient. Use of the telephone or radio dispatch for coordination of prompt emergency services is required, as is a pager, depending on your place of employment. Accurately discerning street names through map reading, and correctly distinguishing house numbers or business addresses are essential to task completion in the most expedient manner. Concisely and accurately describing orally to dispatcher and other concerned staff, one's impression of patient's condition, is critical as the Paramedic works in emergency conditions where there may not be time for deliberation. The Paramedic must also be able to accurately report orally and in writing, all relevant patient data. At times, reporting may require a detailed narrative on extenuating circumstances or conditions that go beyond what is required on a prescribed form. In some instances, the Paramedic must enter data on computer from a laptop in ambulance. Verbal skills and reasoning skills are used extensively. Source: USDOT 1998 National Standard Paramedic Curriculum

CLASSROOM EXPECTATIONS

CLASS ATTENDANCE AND PARTICIPATION

Student attendance and participation is vital to academic success. Regular and punctual attendance and participation in class and laboratories is expected of all students.

It is the student's responsibility to communicate with the faculty member concerning any absence as specified by the respective course syllabus and whenever possible, notify the instructor in advance.

The student may be required to present evidence to support an absence and make-up work for class absences will be permitted only as specified by the faculty in the course syllabus.

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 State Health Services.
- 3. Conduct yourself at all times in a manner, which is conducive to learning.
- 4. Abide by the program procedures as outlined to you by the course faculty and staff including all SOUTH TEXAS COLLEGE procedures.
- 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.
- 10. Have an Active Driver's License (Required for EMSP 1208)

- 11. Have access to reliable internet connection for completing any assignments (e.g., quizzes, exams, homework) online.
- 12. Center of Learning Excellence On-Demand Student Success Workshops certificate submission must be completed prior to first day of class. All certificates must be printed out as original documents no screenshots or picture of documents are allowed.

INTERNET USE RESPONSIBILITIES

Online exams will no longer be reset unless there is a documented problem with Blackboard/Fisdap itself, and then only at instructor discretion. Students are responsible for using a stable computer and internet connection. Students wishing to claim an exception to this rule must submit specific documentation (including ticket or confirmation number if tech support is contacted) confirming the problem happened and that the student had no available method of preventing the problem. Requests must be submitted and approved before the exam's availability period ends.

CODE OF CONDUCT

As Emergency Medical Services providers strive to improve professional status, it is important that all students and EMS personnel 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. 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 EMS Program are expected to conduct themselves in a manner consistent with this code of conduct whenever they represent the EMS Program.

1. The primary purpose of Emergency Medical Services is to respond to persons in need of medical/trauma, 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, all EMS levels 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 AEMT and EMT to respect this privilege. Thus, the responsible performance of paramedics, AEMT and EMT's contributes to continued professional growth and clinical advancement of EMS. EMS Students demonstrate their respect for the physician/paramedic (EMS) 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 team participation, 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. 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 STC Student handbook, which is found on <u>nah.southtexascollege.edu</u> Homepage.

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 illustrates specific acts of academic dishonesty. It is not intended to be all-inclusive.

1. Any use of external assistance during an exam.

Examples include:

- Communicating in any way with another Student during the exam
- Copying material from another Student's exam.
- Allowing another Student to copy from your exam.
- Using unauthorized notes, unauthorized websites, calculators, electronic devices, and any other form of devices.
- 2. Any intentional falsification or invention of data or information in an academic or clinical exercise.
 - Inventing, altering, or falsifying data for a patient report
 - Submitting materials as your own when someone else completed or created the work.
 - 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.

CLASSROOM CONDUCT

Classroom activities (didactic and laboratory) are an essential part of EMS Program courses. Faculty/instructors strive to establish a professional/scenario base classroom environment.

Students must conduct themselves in a manner that continues to facilitate learning.

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 or language.
- 3. Electronic devices i.e., cellular phones, tablets, laptops, smart watches, radios, and other electronic devices such as two-way pagers must be off during classroom and laboratory activities, except during supervised use for FISDAP data entry and as approved or directed by your instructor.
 - 1. Electronic devices as previously mentioned are prohibited for use when engaging in patient care or during clinical settings, and/or during testing whether online or in the classroom. Instructors will designate an area in the classroom, where you may place your non-essential electronic devices in the off or silent mode. STC, the faculty, or staff are not responsible for any damages to the devices while in the designated area.

o 1st Infraction

Written Warning

o 2nd Infraction

 Written documentation will be obtained. If the infraction form is not signed and completed by the next assigned class, it will count as an absence.

o 3rd Infraction

• Five (5) points will be deducted from the overall final grade of the class the student was infarcted for.

Every additional infarction will be considered an absence and an additional five (5) points will be deducted from the overall final grade of that class student was infarcted.

ATTENDANCE

Students are required to attend scheduled class sessions such as lectures/lab, clinical, and practicum. Infractions occurring in lab will count towards the corresponding lecture final grade average.

Attendance is defined as physically being in class and awake at all times. A student who falls asleep in class will be asked to leave and will be counted as absent for that class period. This policy very much applies to video sessions. Students must be physically in class until the instructor gives proper dismissal. Students leaving early are considered non-compliant and will be counted absent.

TARDINESS

A student is deemed tardy if arrived after scheduled time. Tardiness of thirty minutes or more after the assigned time will be counted as an absence. Tardiness will cause student to be ineligible to receive credit on instructor assigned coursework given during the time student is deemed tardy.

Tardiness will be documented and appropriate actions will be as follows:

- o 1st Infraction
 - Written Warning
- o 2nd Infraction
 - Written tardiness documentation will be obtained from student.
 Student must schedule an appointment with Student Success Seminar Specialist at http://nah.southtexascollege.edu/

If this form is not signed and completed by next assigned class, the tardy will count as an absence.

- o 3rd Infraction
 - Written tardiness documentation will be obtained from student.
 Student must schedule an appointment with Student Success Seminar Specialist at http://nah.southtexascollege.edu/

- If this form is not signed and completed by next assigned class, the tardy will count as an absence.
- Five (5) points will be deducted from the overall final grade of the class the student was tardy.
- Every additional tardiness will be considered an absence and an additional five (5) points will be deducted from the overall final grade of that class student was tardy.

ABSENCE

If student is to be absent, student must contact appropriate class instructor at least one hour prior to the assigned time.

Absences will be documented and appropriate actions will be as follows:

- 1st Infraction
 - o Written Warning documentation.
- 2nd Infraction
 - Written absence documentation will be obtained. Student must schedule an appointment with Student Success Seminar Specialist at http://nah.southtexascollege.edu/ If the student success referral form is not signed and completed by next assigned class, the incomplete form will count as a 3rd absence and the student will be dropped from the class. If dropped from any one class, the student will not be able to remain enrolled in the corequisite classes and will be dropped from the program.
- 3rd Infraction
 - Student will be dropped from the program. No additional notice to this action will be required by the instructor/program as outlined by the disciplinary section of this document.

CLINICAL AND PRACTICUM ATTENDANCE

The number of clinical and practicum (EMS rotations) available to Students is limited and strict enforcement of attendance will be imposed. Failure to comply with any of the course procedures will result in the student being sent home. Your clinical instructor may impose

any restrictions or limits he/she deems necessary to ensure fair and adequate availability of clinical and practicum (EMS rotations). Students may not leave their assigned areas without the clinical instructor'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 instructor. Attendance procedure applies to all clinical rotations.

Patient Reports are due on the date and time assigned by your instructor. Reports must be done using the format designated by the instructor to be considered correct. No late work will be accepted and will reflect negatively on your grade. Some additional EMS Clinical/Practicum 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/Practicum instructor. No clinical or practicum rotations may be done while at work (on duty) if you are employed by an EMS Provider. All clinical or practicum rotations must be done as student observer or third rider at a clinical site or in the patient compartment on an ambulance. Students are prohibited from driving company owned vehicles.

CLINICAL REPORTS

Students must complete <u>all</u> required competencies <u>and</u> submit a minimum number of reports as designated by the Clinical Instructor. Paramedic level is based on CoAEMSP Appendix G competency requirements. Weekly submission of reports is required by each student. A percentage of your overall grade will be deducted for each week reports are not submitted. All completed reports will be submitted to the course instructor (weekly through blackboard assignment uploads) and at the week prior to finals to be included on an end of course USB drive. The USB drive will have all the completed reports, total hour sheet and competency forms with required signatures included upon submission.

PRACTICUM REPORTS

Students must complete <u>all</u> required competencies <u>and</u> submit a minimum number of reports as designated by the Practicum Instructor. Paramedic level is based on CoAEMSP Appendix G. Weekly submission of reports is required by each student. Due to unforeseen low call volume during a student's practicum shift, you are required to report to your instructor <u>and</u> have preceptor documentation of the actual number of calls documented in the preceptor's evaluation portion of the PCR. A percentage of your overall grade will be deducted for each

week reports are not submitted. All completed reports will be submitted to the course instructor (weekly) and at the week prior to finals on a USB drive. A completed report will include the preceptor information that includes his/her employee number. The USB drive will have all the completed reports, total hour sheet and competency forms with required signatures included upon submission.

Any questions or problems regarding your clinical and/or practicum rotations should be addressed to your clinical or practicum instructor. 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 take any protected health information or legible patient information away from a clinical or practicum site. Patients are always John or Jane Doe or by number.

TUTORING SESSIONS

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. Students are also encouraged to visit the South Texas College Centers for Learning Excellence Website (https://www.southtexascollege.edu/cle/) for additional assistance.

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 chair **by scheduled appointment**. If this does not resolve the student's concern, he/she may contact the NAH Division Dean by respective appointment. Questions or concerns regarding clinical rotations MUST FIRST be addressed to the clinical instructor.

If you have an important message to give to the EMS Program faculty or staff, verbal communication may not be sufficient. Students may 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. Communicating with an instructor via STC email is acceptable.

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/practicum 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 procedure.
- 3. Violation of any hospital, clinical affiliate or South Texas College procedure.
- 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. Lying, cheating, or stealing.
- 2. Falsification of any records or clinical reports.
- 3. Drinking alcohol or being intoxicated while on "duty". (e.g., during a clinical/practicum rotation,

class or lab)

4. Use of mind-altering drugs or substances while on "duty". (e.g., during a clinical/practicum rotation,

class or lab)

- 5. Willful damage of hospital, clinical affiliate, SOUTH TEXAS COLLEGE or EMS property.
- 6. Conviction of a felony during the program.

- 7. Divulging confidential information.
- 8. Sexual harassment or assault, which may include obscene jokes/gestures or inappropriate touching.
- 9. Constant disruption of class or lab instruction.

PROGRAM READMISSION PROCESS

A student who has failed or withdrawn from a course in an NAH Program, must follow reentry/readmission criteria determined by the NAH Division. For more information on the readmission procedure, refer to the NAH Division Student Handbook. Depicted below is the NAH

Readmission Procedure Flowchart.

In the event the Program's Readmissions Committee determines the student is no longer eligible for re-entry, the student may petition for readmission to The Nursing and Allied Health Division Readmissions Committee.

The following is the EMS Program's readmission procedure for the following:

- 1. Student Withdrawal from any EMSP course with a failing grade
- 2. Student Failing EMSP course
- 3. Incomplete Grades
- 4. Student Withdrawal from any EMSP course for documented medical reasons

STUDENT WITHDRAWAL: FAILING GRADE

A student who withdraws from any EMSP course with a failing grade. Must notify the course faculty prior to withdrawal for reason of withdrawal and must have the Schedule Change Form signed. Student must sit out one semester in the process of complying with the Readmission Process; however, student is encouraged to apply within one year to ensure continuity in their program of learning. Student is eligible to apply for readmission once throughout the EMS Program. Student failing one course within the semester can proceed to Phase 1.

STUDENT FAILING EMSP COURSES

A student that failed <u>one</u> EMSP course within the semester must follow procedure in Phase 1.

Student must meet all current Admission requirements set forth by the EMS program including but not limited to GPA of 2.5 or greater.

Note: A student will automatically be denied Readmission for the following, but not limited to, failure or withdrawal related to unsafe practice, unprofessional conduct, academic dishonesty, and/or unethical behavior. Failure of two or more EMSP courses throughout the EMS Program will result in ineligibility for readmission.

PHASE 1:

Student Responsibilities:

- 1. Student must make an appointment to meet with Program Chair through the Faculty Secretary to discuss the readmission procedure.
- 2. Student will sign Readmission Process Form during the meeting with Program Chair.
- 3. Student will undergo and prepare the remediation portfolio.
- 4. Items to be submitted to the Readmissions Committee by the set deadline:

Student's signed Letter of Intent to inform the Readmissions Committee of their intent to return to the program (letter must include reason(s) of withdrawal or failure and plan of action to be successful if readmitted)

Student's Remediation Portfolio

Student's signed Letter of Petition

Note: A student who does not comply with the Readmissions Committee procedures are not eligible for readmission.

PROGRAM CHAIR RESPONSIBILITIES:

1. Program Chair will meet with student, at least two weeks after the final grades are issued, to discuss and explain the readmission procedure.

Items to be discussed are as follows:

Readmission Process Form (will be signed by the student)

Letter of Intent

Remediation Portfolio

Letter of Petition

2. Program Chair will provide a copy of the Remediation Process Form along with the deadline set by the Readmissions Committee to the student.

Students who are ineligible to apply will be given an Outcome Letter.

3. Program Chair will have the responsibility to submit Letter of Intent and Readmission Process Form to the Readmissions Committee Chair.

PHASE 2:

Readmissions Committee Responsibilities:

1. The Committee will convene to deliberate and review the following:

Students submitted and signed Letter of Intent

Student's submitted Remediation Portfolio

Students submitted and signed Letter of Petition

Readmissions Committee will give preference to students who achieve a failing final course grade

Student's academic course grade, clinical evaluation, and course/clinical disciplinary conferences/warnings/issues (current and past)

Input from current and past course faculty regarding the student's performance.

Student's professional conduct, character, and ethical behaviors demonstrated in the program regardless of the grade in the course. (Reference EMS Code of Ethics and NAH Unsafe Clinical Practice and National EMS Education Standards by DOT)

Student's resolution of mental, emotional, and physical issues influencing program success

Resolution of outside extenuating circumstances, if applicable

Note: Student can be called in front of the Readmissions Committee regarding their professional conduct, character, and ethical behaviors demonstrated in the program. Behavior's unbecoming the EMS profession can result in dismissal from the program.

2. Readmissions Committee will arrive at a decision and may recommend additional requirements for student to follow, if applicable

May require other courses to be taken concurrently as the Readmissions Committee deem necessary

- 3. The Readmissions Committee will recommend a faculty advisor per student.
- 4. The Readmissions Committee will notify student by JagMail that an Outcome Letter is available to be picked up.
- 5. The Readmissions Committee will automatically deny a student for the following, but not limited to, failure or withdrawal related to unsafe practice, unprofessional conduct, academic dishonesty, and/or unethical behavior.

PHASE 3:

Student Responsibilities:

Approved

- 1. Student must pick up the Remediation Portfolio and the Contractual Agreement from the department at the time of pick up, student must sign the Contractual Agreement
- 2. Student must contact and schedule a meeting with their assigned faculty advisor within one week of reentry (failure to comply can result in administrative dismissal).
- 3. Student must follow current course syllabus/program procedures.
- 4. Student must follow any recommendations given by the Readmissions Committee as stated on the Contractual Agreement.
- 5. Student must submit proof of current clinical requirements via Complio (immunizations, insurance, CPR, etc.).
- 6. If student has been out of the program for more than 1 year, student will have to submit a 10-panel drug and alcohol screen (negative results) and approved background check. Unsatisfactory results in either will result in denial of approved readmission.

DENIED

- 1. Student may petition for readmission to the NAH Progressions Committee
- a. Student must setup a meeting with the NAH Division Dean to discuss The Nursing and Allied Health Division Readmissions Committee procedures, no later than 10 business days upon issuance of the Outcome Letter from the EMS Readmissions Committee.

Note: Refer to the NAH Student Handbook: Program Readmission Section.

2. The process ends here.

FACULTY ADVISOR RESPONSIBILITIES:

- 1. Faculty Advisor will be responsible for meeting with the student within one week of reentry to the program.
- 2. Faculty Advisor and student will schedule regular meeting times for the remainder of the semester to ensure student success and to monitor student's plan of action.
- 3. Faculty Advisor and student will adhere to the contractual agreement, set by the Readmissions Committee.

STUDENT WITHDRAWAL: DOCUMENTED MEDICAL REASON

A student may withdrawal from EMSP courses at any time due to documented medical reasons.

A student who is currently failing but withdraws from any EMSP course for documented medical reasons, must follow this procedure.

Student Responsibilities:

- 1. Student must notify the course faculty of the intent to withdraw and the reason for withdrawal. The Schedule Change Form must be signed by faculty.
- 2. Student must meet with the Program Chair to present documentation signed and dated by a health care provider who must be licensed in the USA.
- 3. Student must present medical clearance without restrictions before student can be readmitted to the EMS Program.

- 4. Student may petition to the EMS Program Chair for extension after the first year if extenuating circumstance(s) arise.
- 5. Student must comply and submit proof of current clinical requirements via Complio (immunizations, insurance, CPR, etc.)
- 6. If student has been out of the program for more than 1 year, student will have to submit a 10-panel drug and alcohol screen (negative results) and approved background check. Unsatisfactory results in either will result in denial of readmission.

Once student is medically cleared, the student may continue the following semester, if the course is offered and will follow the current course syllabus/program procedures.

Note: student withdrawals with a documented medical reason will not be counted against the student's record in the program.

INCOMPLETE GRADE

A student who receives a letter grade of "I" (Incomplete) from any EMSP course, must follow this procedure.

The grade of "I" (Incomplete) may be given by a course faculty in certain circumstances for a course in which a student was unable to complete all of the objectives for the passing grade level attempted. The student must complete all of the objectives as dictated by the course faculty by the end of the next long (Fall or Spring) term. Failure to complete all requirements by the end of the next long (Fall or Spring) term will result in a final grade of "F" for the course. For more information regarding the "I" (Incomplete) policies, visit the South Texas College Course Catalog.

The following circumstances may constitute for an "I" (Incomplete) grade for the EMS Program:

a. Pregnant or parenting students under Title IX who are passing in the current courses but have to take a medical leave as referred by the Title IX Coordinator. Please refer to the South Texas College Student Handbook for more information.

Student who has a medical leave and/or extenuating circumstance(s) (must be passing the current course). Proper documentation must be provided to the Program Chair.

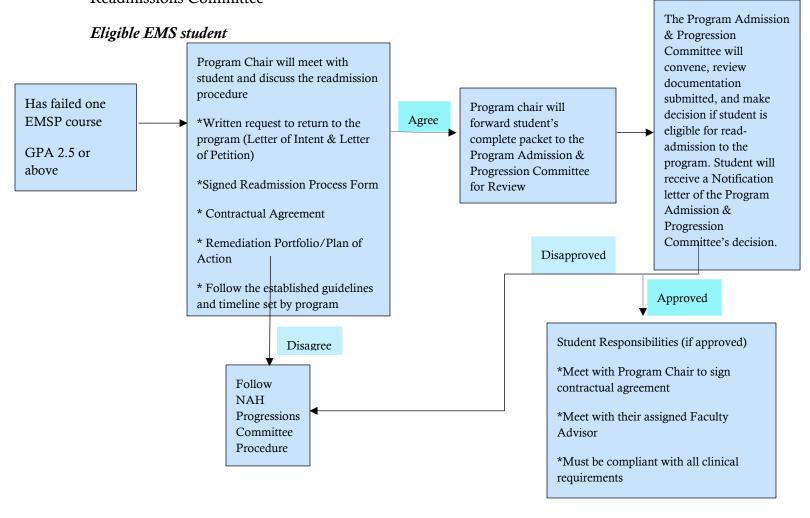
Students must re-enter the EMS program within one year to ensure continuity of learning and mastery of required content. The EMS Readmissions Committee will determine readmission of students not returning within one year on a case-by-case basis due to extenuating circumstances. The EMS Program reserves the right to require a reentering student to initiate program sequence beginning with the first semester and/or repeat selected program courses

previously completed successfully. The Readmissions Committee will determine on a case-by-case basis the best course of study to facilitate student success. Refer to the NAH Readmission Procedure Flowchart on the next page.

Notification Letter: EMS Readmissions Committee will submit recommendation to Dean and Dean will provide memo that includes next steps.

EMS PROGRAM READMISSION PROCESS PROCEDURE FLOW CHART

A student, who has failed or withdrawn from a course in an NAH Program, must follow reentry/readmission criteria determined by the NAH Division. In the event that the Program's Readmissions Committee determines that the student is no longer eligible for re-entry, the student may petition for readmission to The Nursing and Allied Health Division Readmissions Committee



^{*}Students must adhere to the above flow chart process in order to maintain their eligibility. If a student omits and/or bypasses the step order of the flow chart process they will be automatically considered non-complainant and deem ineligible to continue the readmission process.

EMS PROGRAM READMISSION PROCESS PROCEDURE FLOW CHART

A student, who has failed or withdrawn from a course in an NAH Program, must follow reentry/readmission criteria determined by the NAH Division. In the event that the Program's Readmission Committee determines that the student is no longer eligible for reentry, the student may petition for readmission to The Nursing and Allied Health Division Readmissions Committee

Ineligible EMS student Failed 2 or more EMSP courses GPA below 2.5 Disagree Student will be notified by Follow The Nursing and JagMail that Outcome Letter Allied Health Division is available to be picked up. Readmissions Committee Agree Student must sit out to meet current admission program requirements. However, student is encouraged to apply within a year to ensure continuity in the program of learning. If student does not meet current admission requirements within a year. Student must repeat all Paramedic program courses.

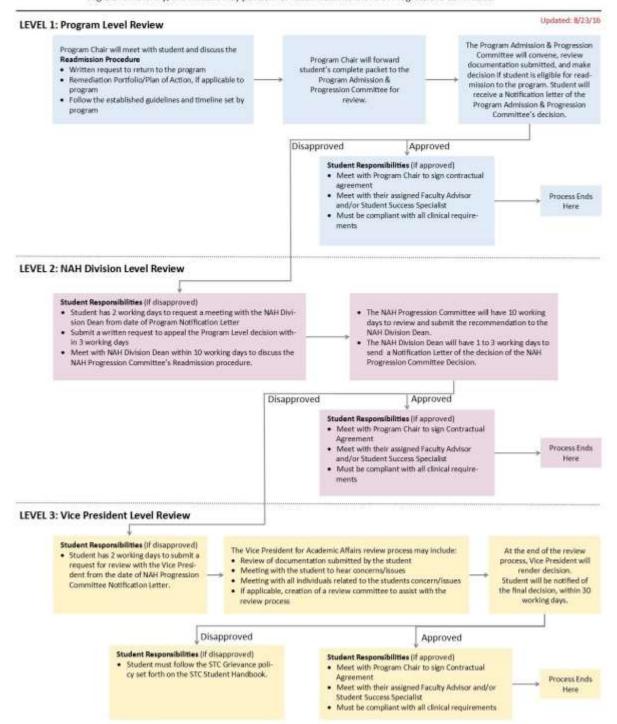
^{*}Students must adhere to the above flow chart process in order to maintain their eligibility. If a student omits and/or bypasses the step order of the flow chart process they will be automatically considered non-complainant and deem ineligible to continue the readmission process.

NURSING & ALLIED HEALTH DIVISION READMISSION PROCEDURE

Nursing & Allied Health Division Readmission Procedure



A student, who has failed or withdrawn from a course in an NAH Program, must follow re-entry/readmission criteria determined by the program. In the event the Program's Progressions Committee determines the student is no longer eligible for re-entry, the student may petition for readmission to the NAH Progressions Committee.



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 EMS Program Chair.

Additional appeals should follow the South Texas College 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

- Provide an overall evaluation of the student's classroom and clinical performance.
- Provide the Student with specific performance improvement recommendations.
- Address Student concerns.

2. Student

- Discuss the overall evaluation of classroom and clinical performance,
- Discuss methods of performance improvement and develop a plan for improvement (if necessary).
- 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 South Texas College 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" "AEMT Student" or "Paramedic Student" of South Texas College.

NATIONAL REGISTRY CERTIFICATION TESTING

This course deals with medical techniques, which cannot only be rapidly lifesaving, but if improperly applied, can be life threatening. It is imperative that individuals certified in these techniques demonstrate sound, mature, stable judgment. Therefore, it is possible that a student may not be allowed to sit for the National Registry Exam, even though he/she may have completed the classroom requirements. Furthermore, you should understand that this program exceeds the requirements of the Texas Department of State Health Services. You must meet the requirements of the program. If you fail to meet the South Texas College EMS program's requirements, you will not be allowed to take the National Registry exam even if you have met the minimum requirements of the Texas Department of State Health Services.

Testing for National Registry certification will be allowed only after the student has met all the requirements for course completion (i.e., attendance, passing scores on all exams, overall course average score, successful completion of clinicals, successful demonstration of skills proficiency, adequate course participation, passing all oral exams, proficient in final mega code, releasing of any College holds etc.). This course is not connected with the Texas Department of State Health Services although it is approved by the department. You are individually responsible for completing the required certification application paperwork and for paying all regional EMS testing fees. You are personally responsible for reading the testing guidelines and being on time with the proper paperwork for EMS certification testing. Additionally, please note that completion of this course does not guarantee eligibility for the National Registry examination and/or Texas Department of State Health. If you have been convicted of a crime, you may be excluded from the testing process. Denial of testing privilege is a National Registry issue and it is your responsibility to assure your eligibility for testing. If you have a criminal record and would like to be evaluated for eligibility, contact the Office of EMS & Trauma Systems Coordination at (512) 834--6740 for more information.

DRESS CODE AND UNIFORMS

MUST BE ALWAYS WORN.

The proper uniform must be always worn while at STC whether in the classroom, clinical site, ambulance site or any other activity with the STC EMS program. If not in compliance with the uniform dress code while in the classroom or clinical site, the student will be sent home from class or clinical and given an absence for the day.

PROGRAM REQUIRED UNIFORM

Students are required to wear a uniform for the program during class, labs, and clinical/practicums.

Uniforms must be kept neat, clean, and well maintained. Due to the possibility of uniforms becoming soiled. Students must always have a change of uniform.

At no time should the uniform be worn into an establishment where the serving and consumption of alcohol is the primary function (i.e., a bar or the bar area of a restaurant unless just passing through to a non-bar seating area). Under NO circumstances will the uniform be worn while the wearer is consuming or with individuals who are consuming alcohol, including in a restaurant. NO smoking or tobacco use, including smokeless or electronic nicotine delivery devices in the building.

- Blue Polo Shirt with STC EMS patch on Left side front and must be properly tucked in at all times (EMSB and AEMS). No exceptions.
- Maroon Polo Shirt with STC EMS patch on Left side front and must be properly tucked in at all times (EMSP). No exceptions.
- Navy blue colored undershirt
- Pressed Blue EMS pants (NO blousing of pants is allowed)
- Black polishable footwear (no tennis shoes)
- Stethoscope, Penlight, Trauma Shears, Oxygen key
- School I.D. Tag on right collar with Badge Buddies
- Eye Protection with side shields
- Black belt
- Watch that displays seconds
- Class 2 or 3 orange reflective vest
- Jackets or coats may be worn in inclement weather, as long as they have been approved by class instructor
- No caps, hats or headwear of any kind are allowed.
- Jewelry. Minimum jewelry may be worn. This provides safe, comfortable, and sanitary conditions for the patient and the care provider. The student may wear:

- Wristwatch with a second hand
- Pierced earrings: one pair of small studs on the earlobes only; no stones, no hoops, and no dangling earrings allowed
- Rings: one plain band only no stones
- No tongue rings or other visible body piercing allowed
- No necklaces or bracelets allowed
- No visible tattoos (must be covered at all times)
- No excessive perfume or cologne
- Hands, including fingernails, must be clean and neat. Nails must be kept short.
- Hair must be clean, well groomed, above the collar, and kept away from the face to
 be in compliance with infection control standards. Hair barrettes should be
 conservative and of color compatible to dress or hair color. Ribbons, headbands and
 scarves are not acceptable. Male students must keep beards and mustaches clean and
 neatly trimmed or be clean shaven. Males with long hair will wear hair above the
 collar.
- Males may wear facial beards or goatees as long as they are maintained clean and neatly groomed at all times and do not interfere with PPE as per CDC guidelines.
 Students may have one opportunity to grow a beard or goatee but may not alternate between both throughout the semester. It is ultimately to the instructor's discretion.
 Some clinical sites may have a conflict with this procedure at which time the student may have to be clean-shaven

This uniform consists of dark blue or navy-blue EMS pants and a navy blue or maroon polo shirt (dependent on level). The uniform Polo will have the South Texas College Emergency Medical Services Program Patch on the left front. South Texas College photo ID nametags must also be worn during all clinical and ambulance rotations. Students must obtain their ID badge from the Student Services office before the end of the second week of the semester.

The uniform should be clean and pressed at all times. Your appearance is not only a reflection of the EMS Program but also of South Texas College and the entire EMS profession. You should take pride in your appearance. More information may be found in Section B -- "Dress Code Procedure". Clinical sites may turn you away if they feel your dress or general appearance is inappropriate.

PERSONAL HYGIENE

You are expected to bathe regularly, wear an effective deodorant and use strong aromatic scents sparingly. All clinical sites used by the EMS Program require appropriate haircuts. Clinical sites may turn you away if they feel your personal hygiene or general appearance is inappropriate. This procedure also applies to classroom and laboratory meetings in order to prevent distraction of other Students.

CONFIDENTIALITY

Students are expected to hold all patient and institutional information in the strictest confidence at all times. The discussion of any patient information outside of the classroom setting is NOT permissible. Confidential information concerning the clinical institution is not to be discussed with any unauthorized individual. If you see a friend, neighbor or relative in an informal setting (i.e., walking down the hall) during a clinical rotation, please do not ask him/her why they are there. This is confidential information and these types of questions cannot be asked.

MALPRACTICE LIABILITY INSURANCE

Students must have malpractice liability insurance which is current and in effect before attending any and all clinical rotations. This insurance is purchased during course registration in conjunction with any clinical course.

Malpractice insurance purchased through SOUTH TEXAS COLLEGE registration provides coverage for the Student ONLY while he/she is:

- 1. Performing as a SOUTH TEXAS COLLEGE EMS Student.
- 2. Participating in an EMS scheduled clinical rotation.
- 3. Performing skills/procedures within the scope of the specific EMS course in which the Student is enrolled (e.g., EMS Students perform EMS course skills).
- 4. Performing skills/procedures that he/she has demonstrated satisfactory ability and received approval of the course instructor to perform the skill/procedure in the clinical setting.
- 5. Functioning under the supervision of a clinical preceptor or equivalent clinical site

representative.

PARKING

Due to the limited parking available at the some of the clinical/practicum sites, Students must park in areas defined by the hospital/EMS services. The clinical/practicum instructor will discuss clinical/practicum parking procedures at the appropriate time. Students who fail to adhere to parking procedures may receive a ticket from the clinical/practicum site such as McAllen Medical Center (MMC) and will be responsible for paying any required fines.

Students who are enrolled at any of the South Texas College campuses are required to obtain a student-parking permit. Students may be issued parking violations with subsequent fines for which the student is responsible.

CLINICAL/PRACTICUM AFFILIATE PROCEDURES

Students must adhere to the procedures of the clinical/Practicum affiliate while performing clinical rotations.

This includes adherence to the procedures of South Texas College while at any on-and offcampus college-sponsored events. No tobacco uses or e-cigarettes/vapes of any type is allowed in any STC buildings, clinical or practicum sites.

All EMS Students are at all times to conduct themselves with proper decorum. You are required to observe the following:

- 1. Refrain from use of alcoholic beverages 8 hours prior to and during the shift.
- 2. Refrain from use of profane or abusive language.
- 3. Refrain from use of excessive conversation, which may interfere with radio communications, while riding in a unit or at the hospital.
- 4. Refrain from entering the sleeping quarters of the medics.
- 5. Refrain from using the phones at the Hospital or EMS stations. Students may use their personal phone during a break or on an emergency basis as approved by the instructor.
- 6. No students are permitted in any of the EMS Stations or Hospital Departments at any time unless you are on the schedule that day.
- 7. Students shall park their vehicles in designated areas at EMS. Do not park in the Doctor's parking or Outpatient parking at the hospital. Use the visitors parking.

- 8. Students may smoke in designated areas only. Not in or around units, and only after all duties are completed. No smoking under the canopy at the hospital (ER).
- 9. No food, drinks, gum, etc. in units. Food/drinks may be transported in the driver's compartment of the EMS unit as long as it is sealed in its original container **IF** allowed by the EMS Agency.
- 10. Do not make remarks or voice opinions to patients or family members, bystanders, police officers, fire personnel, or first responders in any manner, which would tend to provoke or degrade anyone or escalate anxiety.
- 11. Do not make known to any person not authorized, any information concerning the emergency call, patient information or outcome.
- 12. You may not use information gained through the EMS program for personal gain.
- 13. Do not wear, on your clothing, any article, sign, or symbols that advertise products, businesses, or organizations.
- 14. Breaks will be assigned at the hospital if time allows. (A fifteen-minute break may be assigned for every three hours).
- 15. During the first thirty minutes of your rotation, you are required to assist the on-duty medic(s) with their vehicle equipment check-off sheet. Smoking, drinking beverages, TV, etc. should not interrupt this assignment.
- 16. The student will remain outside with the crew to help complete any assigned duties, such as washing a unit, cleaning/disinfecting a unit, and/or restocking, etc.
- 17. Student evaluation sheets are to be completed prior to departing your EMS rotation. Medic evaluation sheets should be completed after leaving the internship sight.
- 18. Make-up should be applied minimally and discretely; hair must be tied back and out of your face. No heavy make-up is allowed.
- 19. Good oral and personal hygiene are essential. Remember, cigarette smoke and perfumes or colognes may be offensive to others or patients. No heavy cologne or perfume (both sexes)
- 20. No portable hand held- radios, cellular phones or similar equipment shall be brought to your Clinical site (either the EMS stations or the hospital) as they may interfere with communications. No service or facility will be responsible for lost, broken, or stolen articles, etc. that you bring with you.
- 21. Cell phones and pagers must be placed in the silent or vibrate mode of operation.
- 22. If you cannot make your scheduled hours, contact your instructor <u>NOT</u> the clinical/practicum site.
- 23. Students must be on time.

- 24. Students may not stay longer than scheduled time. If the student is on a late call or their ride along crew is unable to drop student off, you are required to notify your instructor.
- 25. All students must sign a liability release form prior to riding out with EMS.
- 26. Only authorized people will be allowed to ride on an EMS vehicle.
- 27. Students must follow all requirements and rules of the service or facility prior to and during each shift.
- 28. No one under 17 years of age may ride with EMS regardless of affiliation without the expressed written consent from the Director of Operations.
- 29. If the Student does not meet the rules and regulations pertaining to the dress Code, student may not be permitted to complete rotations until they have complied with the rules.
- 30. No Student will be allowed to start rotations until clinical requirements (Complio Compliant) are up to date.
- 31. Ask if you can help. Don't just sit (stand) there if there is work to do.
- 32. Adhere to all procedures and procedures pertaining to EMS personnel while "on duty".
- 33. Provide your own transportation to and from the station(s).
- 34. Bring sufficient money to cover meal expenses as the crew may eat out.
- 35. You should not bring any other person to the station during your ride-out time.
- 36. You are required to complete your "shift". Exceptions are for emergencies only. Your request should be voiced to your Clinical/Practicum instructor.
- 37. Students may not arrange their own rotations. They must be scheduled through your instructor. If this procedure is violated, you will be dropped from your clinical class. No exceptions!
- 38. Students must meet the minimum competencies requirements for the set given program level. Failure to meet these requirements will result in failure of the Clinical/Practicum Class and thus will make you ineligible to present for the National Registry Exam.
- 39. Your role is to interact in the patient process by performing duties as delegated by the affiliate agreement with the EMS provider and the hospital. The amount of involvement is to be determined by the senior medic on the ambulance and the nurse or preceptor in the hospital.

Many of these procedures originate from the facilities/providers in which we are guests. These procedures are not optional.

GUIDELINES AND PRACTICES FOR USE OF SOCIAL MEDIA

- 1. Private information of patients, healthcare facility staff, college staff and fellow students should never be discussed in any form of social media. The Health Insurance Portability and Accountability Act (HIPAA) guidelines are to be upheld at all times both in classroom and clinical/practicum course activities.
- 2. The uploading, downloading and distribution of unauthorized pictures, videos and course materials are strictly prohibited without express written permission of the faculty and other persons concerned, and will be administered entirely by the designated employee of the college responsible for the NAH division social media platform pages.
- 3. Social media interactions like but not limited to texting, e-mailing and social networking are not permitted during class and clinical hours. The use of electronic devices in clinicals/practicum are used only as authorized by faculty and the healthcare facility. Devices must be in vibration mode. In addition, the use of notebooks, iPads, etc.... during class will only be permitted for note taking and other related college activities as authorized by the faculty. If a student needs to respond to an emergency text/call, the student is asked to leave the classroom as deemed necessary.
- 4. Students will not use unapproved social media to communicate with faculty and staff. Students will use communication methods as specified in the syllabus (jag mail, blackboard, Pronto Messenger).
- 5. The division of Nursing & Allied Health will maintain a main Facebook page including NAH program pages as determined by each Program Chair.
- 6. No NAH program or student club shall maintain an independent social media page. All program and student club social media platforms will be administered entirely by the designated employee of the college responsible for the NAH division social media platform page. Students will submit materials for inclusion on their pages to the designated social media administrator.
- 7. It is the student's responsibility to keep their private social media site appropriate and profiles clean. It is highly recommended that students adjust privacy settings for personal accounts to limit public access.
- 8. Consequences for inappropriate use of social and electronic media by a Nursing and Allied Health division student will be handled on a case-by-case basis. The consequences will depend, in part, on the particular nature of the incident. Violations of patient/client privacy via electronic device will be dealt according to disciplinary action included in the STC Student Handbook, and the NAH handbook.

HEALTH AND SAFETY PROCEDURES

South Texas College and the EMS faculty and staff are concerned about the general health, safety, and welfare of all Students, employees and visitors. For this reason, several specific procedures have been developed to promote a safe learning environment for all.

COVID-19 STATEMENT

Due to the unpredictable nature of the current pandemic, course meeting times/dates, requirements, and method of delivery may change according to state and federal guidelines to ensure student, faculty, and staff safety and well-being. Please refer to the College's Instructional Plan for detailed information regarding mask, social distancing, and General Campus Requirements: COVID-19 (Coronavirus)

DRUGS AND ALCOHOL USE

The South Texas College Student Handbook contains the procedure statement entitled "Annual Notice of Drug and Alcohol Abuse Prevention". In addition, the Handbook contains a specific procedure, which outlines the "Expectations of Student Performance" with respect to substance abuse (South Texas College NAH handbook page 14). EMS Program Students must abide by these procedures as required of all Nursing and Allied Health Students. Students will be required to certify in writing that the student is "not engaging in any substance abuse behavior." Students who are suspected of being under the influence of alcohol and/or drugs while at a clinical/practicum site are subject to the procedures and procedures of that specific site in addition to those of South Texas College.

DRUG TESTING

School will ensure that each Program Participant obtains prior to each nonconsecutive rotation a drug test acceptable to Hospital, including at a minimum, the following:

1. Substance tested prior to placement at the Hospital must at a minimum include amphetamines, barbiturates, benzodiazepines, opiates, fentanyl analogues, methadone, marijuana, mependine, and cocaine.

2. A Program Participant may be required to undergo additional drug and alcohol testing upon reasonable suspicion that the Program Participant has violated Hospital's policies, and after any incident that involves injury or property damage.

Hospital shall not bear the cost of any such tests. Should the testing disclose adverse information as to any Program Participant, Hospital shall have no obligation to accept that Program Participant at the Hospital. To the extent that any Program Participant violates the policy for drug or alcohol abuse after placement at the Facility, or refuses to cooperate with the requirement for a search or reasonable suspicion and reportable accident testing, then the Facility may immediately remove the Program Participant from participation in the Program at the Facility.

PHYSICAL AND MENTAL HEALTH

Students are expected to ensure good physical and mental health sufficient to perform the duties of an EMS Program Student. Students, particularly those new to the field of emergency medical services, should review the "Nature of Work" and "Functional Job Description" sections of the EMS Program web site. Those without access to these documents may request them from the EMS Program staff.

CHANGE IN HEALTH CONDITION

A Student who has any significant change in his/her health that may affect or be affected by his/her EMS Program coursework will be required to obtain a physician's release. The release must specify the conditions that the student is able to return to the classroom and clinical activities. Examples of significant changes in health status include: pregnancy, infectious diseases, and significant physical injury or illness.

HEALTH CARE SERVICES

South Texas College and affiliated clinical sites have no responsibility for providing health care services in the event of illness or injury. Students are required to carry health insurance and will not be able to attend clinicals/practicum until valid proof is on file in department office. In addition, Students may be requested to acknowledge and sign additional liability release forms from clinical sites.

IMMUNIZATIONS AND VACCINATIONS

**The following immunizations are required for all students in health-related courses, which involve direct patient contact in medical settings:

- 1. Measles, mumps, and rubella (MMR): proof of immunizations as defined by the Texas Department of Health Standards or proof of immunity by disease.
- 2. Tetanus/diphtheria/pertussis (Tdap): proof of "booster" dose administered within the last ten (10) years.
- 3. Hepatitis B series (HBV): certification of serological immunity to HBV or completed series of HBV vaccinations.
- 4. Varicella (chicken pox) vaccines or titer report proving immunity
- 5. Meningococcal vaccination within the last 5 years (under the age of 22). All students must have a current signed Meningitis Waiver Form completed through South Texas College Admissions. pg. 48
- 6. Influenza vaccine (August April or as required by the Texas Department of State Health Service) Proof of documentation must include lot number and expiration date of vaccine.
- 7. COVID-19 vaccinations are not required as a part of the college or program requirements but may be required to comply with clinical and practicum affiliates.

The student will assume full costs of the immunizations, personal health insurance coverage, and medical services. Inquiries concerning any exemptions to this requirement should be directed to the NAH Division Clinical Affairs Specialist.

INFECTION CONTROL

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

- 1. Wash their hands before and after contact with patients and patient care equipment.
- 2. Wear gloves when contact with blood, body fluid, tissue, or contaminated surfaces is anticipated.

- 3. Wear gowns or aprons when spattering blood or other potentially infectious material is likely.
- 4. Wear masks and eye protection when aerosolized or splattering of anybody fluid is likely to occur.
- 5. Clean all blood spills promptly with an appropriate disinfectant or germicidal agent.
- 6. Consider all blood specimens as potentially infectious.
- 7. 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.

CLINICAL SITE PROCEDURES

Students are required to follow all Health and Safety Procedures and Procedures requested by the clinical site. This includes any verbal directive provided by the student's preceptor when requested to comply with the internal procedures of the clinical site.

ACCIDENT AND INCIDENT REPORTING

South Texas College holds no liability for accidents that occur to Students during scheduled school hours. In the event of an unusual incident involving a student, employee of the clinical facility, and/or patient, the student should provide written documentation of the incident to his/her instructor. The student must also immediately notify his/her South Texas College preceptor or instructor. An example of an unusual incident is a patient injury witnessed by the student during the clinical rotation. In the event a student is injured during a clinical rotation, he/she must provide written documentation of the incident to his/her instructor at the earliest possible point in time. This written reporting must not delay the student from seeking medical attention, if required. Following such events of accidental injury, the student must verbally notify the preceptor and instructor.

NOTICE OF CHANGES TO THE STUDENT CODE OF CONDUCT

STC EMS PROGRAM RESERVES THE RIGHT TO MAKE ANY CHANGES TO THE CONTENT OF THIS DOCUMENT AT ANY TIME WITHOUT ADVANCE NOTICE.

APPENDIX

STUDENT AGREEMENT

<i>I</i> ,		, hereby acknowledge that the
student handbook and course syl	llabi were reviewed at the EMS Prog	gram Orientation on
and I understand that the hand	dbook and syllabi can be found on	the EMS program website, STC
blackboard and other electronic	mediums used by the program. I ca	n request a copy from the program
administrator assistant prior to	commencement of said course. I a	gree to abide by the contents and
procedures outlined and described	ed in the EMS Program Student Ha	ndbook and the Student Handbook
NAH with regard to South Tex	xas College EMS Program and full	y understand the implications and
consequences of failure on my par	rt.	
Student Signature	Date/_	/
Instructor name		
Instructor	Date/_	/

Signature of a faculty member constitutes the above acknowledgement of the student agreement for all course classes including lecture, lab, clinical and practicum throughout program semester.

Name: Date of Birth: School A# Address: Primary Phone Number: Secondary Phone Number: E-Mail: Pertinent Medical History: Allergies Emergency Contact Information Name: Phone Number:

ACKNOWLEDGEMENT OF STUDENT HANDBOOK

I have read, understood, and will abide by the policies, procedures, rules, and regulations as outlined in the Emergency Medical Services *Associate of Applied Science (EMSAAS) Student Handbook* during my tenure as a EMS student in the EMSAAS Program, Division of Nursing and Allied Health, South Texas College. My initial in the boxes indicate my understanding and acceptance of my responsibilities as an EMS student. I will fill in the page number in the Student Handbook to indicate that I know where to locate the guidelines and procedures.

INITIAL	COMMITMENT	REFERENCE	Pg.#
	Attendance Procedure (Classroom/Clinical)	Student Handbook	
	Clinical Policies	Student handbook	
	Professional Appearance	Student handbook	
	Examination Make-Up	Student Handbook	
	Grade Appeal and Grievance Policy and Procedure	Student Handbook	
	Syllabus Acknowledgement	Instructor	
	National Registry of Emergency Medical Technicians	https://www.nremt.org/	
	Procedures For Special Accommodations & Pregnant And Parenting Statement	Student Handbook	
	Professional Conduct	Student Handbook	
	Program Learner Outcomes	Student Handbook	
	Program Philosophy, Mission, and Vision	Student Handbook	
	Progression Criteria	Student Handbook	
	Testing Remediation Procedure	Student Handbook	
	Readmission Procedure	Student Handbook	
	Texas Rules & Regulations to Professional EMS Education, Licensure and Practice	https://www.dshs.texas.gov/emstraumasyste ms/	
	Safe Clinical Practice Standard	Student Handbook	
	STC Academic Integrity	Student Handbook	
	NAH Division Honor Contract	Student Handbook	

I further understand that new STC policies, guidelines, and procedures may be implemented that must be adhered to during my tenure as an EMS student in the EMS-AAS program. It is my responsibility to stay informed of new STC policies, guidelines, and procedures through the EMSAAS website, course syllabus, announcements in class, and through the student representative of my cohort.

	Student's Signature	ID Number (A#)	Date
Received by:	Printed Name/Signature	Title	Date

HONOR CONTRACT

I understand that Nursing & Allied Health Program students are expected to menvironment of academic integrity. I further understand that actions involving dishonesty violate the professional code of ethics. I have been informed	
and understand that any student found guilty of scholastic dishonesty is subject from the EMS Program.	to dismissa
I have read the Scholastic Honesty Standard in the Nursing and Allied Health Student Handbook. I understand the Scholastic Honest Standard and I agree to abide by this stated policy(initials)	
Name of Student (PRINTED)	Date

Student

Signature

NAH CONFIDENTIALITY STATEMENT

In accordance with regulations regarding confidentiality of information or knowledge concerning the client/patient, students in Nursing & Allied Health Programs shall adhere to the following policy:

1. Except in the structured, teaching-learning situation, all aspects of the patient/client's medically-related information and/or data shall not be discussed with any other person or persons under any circumstances.

Proper identification as stated in the dress code is required before reading charts/records.

- 2. Students must not photograph patients/clients.
- 3. Students must not photocopy, take a picture and/or tape record any part of the patient's/client's chart/record or at the scene of an emergency.
- 4. Students must adhere to program and facility departmental guidelines when referring to patients in written assignments.

I understand that all information about the client/patient's condition is confidential. I hereby acknowledge that I will not discuss such confidential information in ANY public area inside or outside of the educational arena.

Name of Student (PRINTED)	Date
Name of Student (SIGNATURE)	

STUDENT CONSENT TO BE VIDEOTAPED OR PHOTOGRAPHED

Videotaping, audio-taping, photographs and other media may be used in this or record faculty and/or student demonstrations of procedures and techniques, la and/or practical examinations. Faculty and/or Program students will use these instructional purposes only. If the faculty or the college wishes to use these for purposes (e.g., program promotion, public relations, commercial sale), you wi sign a separate release. Refusing to allow yourself to be videotaped, photograp impact your grade in a course, or your progress in the Program.	ab activities, se for any other Il be asked to
I agree to participate in any videotaping, audio-taping, photographing or other presentations to be used for instructional purposes only.	r media
Name of Student (PRINTED)	Date
Student Signature	

RELEASE OF PERSONAL INFORMATION

Texas (udent in the Nursing and Allied Health Division/	on for the purposes of receiving	
	onally, I understand that I may remove my personal inforting the departmental secretary.	nation from any published list b	y
	Printed Name:Address:		
	Phone Number:		
	Anticipated Graduation Date:		
	Name of Student (PRINTED)		
	Student Signature	Date	

NAH SAFETY INCIDENT REPORT

This form needs to be completed by the student and SOUTH TEXAS COLLEGE faculty member. Report should be submitted to <u>clinicalaffairs@southtexascollege.edu</u> within 48 hours of incident.

Name of Student/Visitor:	Student ID #:
Address:	☐ PROGRAM ☐ PROSPECTIVE NAH STUDENT ☐ VISITOR
City, Zip Code:	Cell Phone:
Date of Incident:	Time of Occurrence:
Location of Incident	□ NAH CAMPUS BLD RM □ CLINICAL AFFILIATE:
Who was notified of incident? Check all that apply.	☐ Staff Member☐ Clinical Affiliate Facility Administrator☐
Describe the details of the incident (How/What/Where/Why) BE VERY SPECIFIC:	
Nature, Extent, Degree and Body Locations (s) affected by incident:	
Was protective equipment worn, provided, or required? (Ex, goggles, gloves, facemask, etc.) (If yes, please describe):	
Were there any witnesses to the incident?	☐ Yes ☐ No (If yes, please list names):
Recommended Action:	
Preventative Measures taken:	
Date:	
Student Signature:	Student Name (print):
Faculty Signature:	Student Name (print):