

KINGSBOROUGH COMMUNITY COLLEGE
OF
THE CITY UNIVERSITY OF NEW YORK

**PROPOSAL TO ESTABLISH A PROGRAM IN
EMERGENCY MEDICAL SERVICES
LEADING TO THE
A.A.S. DEGREE**

EFFECTIVE FALL 2011

SPONSORED BY THE DEPARTMENT OF NURSING

APPROVED BY

Letter of Intent approved by College Council: September 14, 2010
Department of Nursing Curriculum Committee Approved: September 28, 2010

College Representative: Professor, Denise Giachetta-Ryan, Nursing
Contact: Professor George W. Contreras, Nursing

Telephone: 718-368-6721
Fax: 718-368-4867
Email: gcontreras@kbcc.cuny.edu

Provost Signature: _____

Provost Name : Dr. Stuart Suss
Vice President for Academic Affairs and Provost

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Abstract

Emergency medical services (EMS) is a field comprised of various levels of pre-hospital care ranging from the emergency medical technician (basic level) through the paramedic (advanced level). The pre-hospital care provider is the very first person that a patient will encounter during a medical emergency.

It is vital that this pre-hospital care provider have the necessary knowledge and skills to stabilize the patient and render any life-saving interventions as safely and quickly as possible. The New York State Department of Health Bureau of Emergency Medical Services (NYS DOH BEMS) regulates the training curriculum for the paramedic.

In New York City, there are approximately 8.4 million people. The borough of Brooklyn has approximately 2.5 million people. There is currently no community-college level institution in Brooklyn that offers the paramedic training program. Kingsborough Community College has the opportunity to become the first NYS DOH-BEMS approved academic institution to offer the paramedic curriculum in the Borough of Brooklyn.

With recent changes in the economy, there is a great opportunity to offer a productive allied health field to the residents of Brooklyn. In doing so, KCC will provide the initial exposure of the health care field to individuals who may positively contribute to society. KCC can create the Paramedic Program as part of a long-term goal to create a Department of Allied Health Sciences. As part of an academic institution, the paramedic program will have valuable resources which can assist students in their career of choice.

Purposes and goals

A. Educational Goals

The goal of the A.A.S. in Emergency Medical Services (EMS) is:

1. to prepare Paramedics who are highly competent in the knowledge, skills and demeanor which meet national, state and regional standards for Paramedic professionals.
2. to provide a quality general education that facilitates personal development, global citizenship and a foundation for success in further higher education.

The National Highway Traffic Safety Administration, which itself is an agency of the United States Department of Transportation, issues the official US DOT National Standard Curriculum for Emergency Medical Technician-Paramedics (EMT-P). Kingsborough Community College (KCC) Paramedic program will reflect this standard curriculum.

The Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoEMSP) is part of the Commission on the Accreditation of Allied Health Programs (CAAHEP). This Committee sets standards for program accreditation of allied health professions. KCC's Paramedic program will meet these standards. In New York State, there are only nine CAAHEP-approved paramedic programs. In New York City, there are only three CAAHEP-approved paramedic programs. There is currently no CAAHEP-approved program in Brooklyn.¹

The New York State Department of Health, Bureau of Emergency Medical Services, sets standards for approved programs throughout the state. New York City's regional body, Regional Emergency Medical Services Council of New York City, REMSCO, also approves training sites according to its standards. KCC's Paramedic program will be approved by these entities. There are currently 26 NYS DOH BEMS-approved training agencies in the City of New York. Of those 26, there are only two degree-bearing community college-level sites: Borough of Manhattan Community College in Lower Manhattan and LaGuardia Community College in Queens. Both colleges have been successful with their paramedic programs. There is currently no community college-level training site in Brooklyn.² Finally, the National Registry of Emergency Medical Technicians and Paramedics (NREMT) also sets standards for paramedics in several states other than New York. KCC's Paramedic program will meet these standards as well. This will benefit the student if he/she wishes to practice outside of New York State.

¹ Commission on the Accreditation of Allied Health Programs. <http://www.caahep.org/find-an-accredited-program>. Accessed on September 4, 2010.

² New York State Department of Health, Bureau of Emergency Medical Service. <http://www.health.state.ny.us/nysdoh/ems/educ.htm>. Accessed September 5, 2010.

All five standard curricula are substantially the same and KCC's A.A.S. in EMS will meet all five, as well as receive national accreditation, NY Department of Health and REMSCO approval for the program.

On April 2010, the New York State Department of Health Bureau of Emergency Medical Services approved KCC as a training agency at the EMT-Basic and Certified First Responder level. As per the State, (conversation with Andrew Johnson, BEMS), KCC will have to complete its first EMT course (which starts in September 2010 and ends in January 2011) before it will consider a review of upgrading the training level to Paramedic. KCC is currently seeking support from relevant agencies to request that the State expedite this review and approval process so that the first KCC Paramedic program can start in September 2011.

KCC's Paramedic curriculum will also provide instruction for additional paramedic credentials which are beyond the minimum curriculum essential for program accreditation and approval such as: American Heart Association (AHA) Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), Neonatal Advanced Life Support (NALS), National Association of Emergency Medical Technicians Pre-Hospital Trauma Life Support (PHTLS), American Academy of Orthopaedic Surgeons (AAOS) Advanced Assessment of Trauma (ATT) and Federal Emergency Management Agency (FEMA) trainings such Weapons of Mass Destruction (WMD) awareness. Furthermore, to better serve Brooklyn, which has a density of apartment buildings and is surrounded on three sides by water, KCC's Paramedic curriculum will include instruction in hi-rise extrication (by stair chair and other means) and deep water rescue techniques according to US Coast Guard standards.

This program is designed to provide the following:

- A two-year curriculum leading to an AAS in Emergency Medical Services.
- A transfer option for students who complete the EMT-Basic Program sponsored by Kingsborough's Healthcare Institute and receive advanced placement in the AAS program.
- Professional coursework leading to a Certificate of Completion with which students can seek certification and employment as a Paramedic in New York and/or other states.
- A degree option for those already holding EMT-Basic certifications who can receive advanced placement into the paramedic program.
- A degree option for those already holding Paramedic certification who can receive advanced placement into the AAS in EMS program.
- Continuing education credit required for state and national certification renewal.

B. Status of the Profession

The field of Emergency Medical Services (EMS) is part of the specialty of Emergency Medicine. The EMT-basic is the first level of certification. The most advanced level of training for this occupation is the paramedic. At this level, the caregiver receives

additional training in body function and learns advanced and invasive skills. The paramedic is able to provide emergent interventions to sustain life and possibly prevent further damage from occurring. The paramedic is able to perform invasive life-saving procedures such as but not limited to intravenous and intraosseous insertions, endotracheal intubations and provides a variety of medications including narcotics.

The program usually results in an Associate in Applied Science degree (AAS) and prepares the graduate to take the National Registry of Emergency Medical Technicians (NREMT), the NYS DOH BEMS, and the Regional Emergency Medical Advisory Council (REMAC) examinations and become certified as a Paramedic. Extensive related coursework, a major portion of which is clinical and field experience, is also required.

EMTs and paramedics must be free from criminal conviction, emotionally stable, have good dexterity, agility and physical coordination, and be able to lift and carry heavy loads. They also need good eyesight (corrective lenses may be used) with accurate color vision.

Advancement beyond the Paramedic level usually means leaving fieldwork. A Paramedic can become a supervisor, operations manager, administrative director, or executive director of emergency services. Some EMTs and paramedics become instructors or dispatchers, while others move into sales or marketing of emergency medical service equipment. A number of EMTs and paramedics enter the field at this level to assess their interest in health care, and then decide to return to school and become registered nurses, physician assistants, physical therapists, respiratory therapists, or physicians.

The NHTSA curricula are the national standard for EMS education and are referenced in many State laws and administrative rules as the basis for the scope of practice. The KCC Paramedic program will meet the current NHTSA curricula and modify the program as needed.

C. National and Local Educational Trends

Emergency medical services (EMS) education has evolved over time and, as is true of most new professions, no master plan was conceived to guide its evolution systematically. Effective components of quality EMS education have emerged during the last thirty years, including the national standard-EMS curricula, accreditation standards and a national registration system. Unfortunately, these individual parts have developed independently, and currently there is no formal EMS education *system* in which the components and their roles are clearly defined, their interrelationships articulated, and the decision-making process for modification and improvement established.

In the 1970s, the stakeholders of EMS had no way to predict the challenges that would face the profession during this period of rapid growth. While many of them are volunteers, EMS providers are also paid, full-time personnel. They work in hospital-based or public safety-based programs. Local variations of practice present challenges which are unique to this allied health care profession.

A training site must be approved by the State of New York Department of Health and the Regional Emergency Medical Services Council of New York. This approval is done before any training can begin. Sponsors must complete a needs assessment, which must demonstrate both a community and a student need for the program and that it will not undermine enrollment in currently approved sponsor sites. Sponsor sites typically begin with EMT-B offerings and, after they demonstrate success, can apply for a site upgrade and add the Paramedic courses.

Karen Meggenhofen, Associate Director, New York State Department of Health, Bureau of Emergency Services, acknowledged that there is a need for more Paramedic graduates in the NYC area, and the largest employers are the Fire Department of New York EMS Command (NYC's municipal EMS provider) and private companies such as AMR (American Medical Response, a national ambulance service provider) and Transcare and several hospital-based EMS departments such as New York Hospital, Long Island College Hospital, Wyckhoff Hospital and New York Downtown Hospital. Statewide, New York has more than 60,000 licensed EMT-Bs. Although most of these are avocational, non-paid volunteers, paid employment is a growing trend.

New York is not a National Registry State. It has its own certifying examinations and does not use the NREMT national credentialing exam system. Currently the pass rate for first-time candidates on this exam is around 90%. The average pass rate for the NREMT exam is significantly lower.

As per a recent conversation with Ms. Diglio on September 3, 2010, the Regional Emergency Medical Services Council of New York City confirms that it will likely look favorably on KCC as a sponsor at the Paramedic level and will support our pursuit of advanced level certification by NYS DOH. There is also a bridge possibility for Paramedics to ADN programs in the State.

Need for the Curriculum

The largest employer in Brooklyn is health care. A NYS certified paramedic would be able to obtain employment through various entities such as FDNY EMS, hospitals (e.g. LICH, NYPH, NYDH, Roosevelt Hospital) that have their own EMS service, private EMS companies such as American Medical Response, TransCare, First Response, Senior Care and even volunteer ambulances such as Park Slope Volunteer Ambulance Corps, Flatlands Volunteer Ambulance Corps, Chevra Hatzolah Volunteer Ambulance Corps, Central Park Medical Unit, and Bedford Stuyvesant Volunteer Ambulance Corps.

A needs study will be conducted according to REMSCO's standards and as a part of the sponsorship approval process during the upgrade application from EMT to Paramedic. The recent NYS DOH approval at the EMT level (on April 2010) affirms that there is still a significant demand for the program from its employers and potential students.

Furthermore, KCC has the opportunity to become the first Brooklyn community-college level institution to offer this paramedic program. This program can offer potential earnings for members of the community from diverse backgrounds and interests.

Students

Kingsborough administration, faculty and counseling staff universally have confidence in the principle of "If we build it; they will come". Certainly, the population base served by Kingsborough is large enough to project that there will be a strong reaction to educational opportunities at his level for these rewarding professions. Applicant pools for the extant programs are excellent at present. Brooklyn has a population of approximately 2.5 million and cites its major employer as health care institutions.

Enrollment at Kingsborough Community College reached 14,220 matriculated degree students in the Fall 2009 semester, and added to the number of non-degree the total swells to 18,204 students. In spite of the interest of significant numbers of these students in allied health career education, many do not have access due to the limited number of programs and program seats available. Therefore, there is a need to provide additional, equally viable career programs.

This program will be initially offered only as a full-time program of study. Students who transfer into the program with general education and pre-requisite courses satisfied, may be able to enroll in some major and clinical courses and complete a semester's work while enrolled for less than 12 credits. Other than these exceptions, first-time freshmen will be advised that the program requires a full-time credit load each semester.

A.A.S in EMS Enrollment Projections

	<u>Year I</u>		<u>Year II</u>		<u>Year III</u>		<u>Year IV</u>		<u>Year V</u>
Full-Time	15	*	25	*	35	*	35	*	35

After the first year, each new class is expected to be approximately 25 students Year 2 and 35 students Years 3- 5; first-year to second-year attrition is calculated to be 30% and at the conclusion of the second-year of their attendance, all continuing students are assumed to have graduated or not completed and are therefore not calculated in the subsequent year.

Meetings with representatives from the 1199SEIU League Training and Upgrading Fund indicate significant interest in a Paramedic program for its members who are currently employed in health care. Evening and weekend courses and other non-traditional scheduling will be created to accommodate these students' time-management issues. Typically, Paramedic Programs are offered in the evening and on weekends and it is likely that a number of the courses in the curriculum will be offered at these times at Kingsborough. Each major course can be modularized and tied into technology supported instructional resources such as simulation and computer-assisted instruction and testing. Faculty will be encouraged and supported to use these resources. Clinical experiences can be scheduled throughout the weekday, evening and night as well as on weekends to accommodate student scheduling needs. Furthermore, there are opportunities for tuition reimbursement (from the union) for college-based courses. This

financial aid may also assist potential students in pursuing and enrolling in the paramedic program.

Department of Student Development personnel has enthusiastically endorsed this proposed program and has agreed to schedule the shadowing of practicing professionals prior to implementation to strengthen their understanding of the work environment and scope of practice for Paramedics. This will better equip them to help potential students select the right profession and may increase retention in the program.

Curriculum

This curriculum is designed to prepare students who will be ready to work anywhere in the United States as highly qualified emergency medical technicians. The curriculum includes the science of human anatomy all health technicians must know and is prerequisite to clinical courses, and the humanities, social science and other general education courses, which are essential for all associate degree graduates, provide a foundation for further higher education and help create a well-rounded individual and citizen.

A. Description of New Courses

EMS 10000 Emergency Medical Technician-Basic

Credit

5

The course will cover introductory material including overview of Emergency Medical Services (EMS), EMS Systems, Roles and Responsibilities of the Emergency Medical Technician (EMT) and Paramedic, and Anatomy & Physiology, Pathophysiology and Airway Management, clinical pre-hospital pharmacology, shock and resuscitation, medical and trauma assessments, special populations, EMS operations and a special section on how to assist paramedics in the field. Lab work involves bleeding control, CPR, patient assessment, splinting and patient movement techniques. Skills are subsequently demonstrated and practiced in the laboratory, hospital and/or the field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 10100 EMT-Basic Clinical I

Credit

1

This course is designed to introduce the student to individualized experience in the field of emergency medical services in specific areas of preparatory, airway, patient assessment, trauma, medical, special considerations, and operations from the perspective of an EMT. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 21000 Paramedic I

Credit

7

The course will cover material including Introduction to Advanced Prehospital Care, EMS Systems, Roles and Responsibilities of the Paramedic and Medical/Legal Aspects of Advanced Prehospital Care, and Anatomy & Physiology, Pathophysiology and Advanced Airway Management. Clinical pre-hospital pharmacology, IV access and advanced airway management techniques are introduced. Lab work involves IV access techniques, endotracheal intubation, computing dosages, preparing medications for administration and practice in all administrative techniques. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course. In addition, students will practice BLS skills including Patient Assessment, Bleeding and Fracture Management.

EMS 21100 Paramedic Clinical I

Credit

2

This course is designed to introduce the student to individualized experience in the field of emergency medical services in specific areas of preparatory, airway and become familiar with hospital departments and ambulance operations. This course is the first of a four-course clinical sequence. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 22000 Paramedic II

Credit

5

The course will cover material including Patient Assessment, Pharmacology, Airway and Medical Emergencies. Patient assessment and formulation of a field impression, selecting and implementing an appropriate treatment plan for the patient will be emphasized. Skills related to the practice of advanced pre-hospital care are demonstrated, learned and practiced in the laboratory/hospital/field. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 22100 Paramedic Clinical II

Credit

3

This course is designed to allow the student to continue the individualized experience in the field of emergency medical services in specific areas of preparatory, airway. This

course is the second of a four-course clinical sequence. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 23000 Paramedic III

Credit

7

The course will cover material including Medical Emergencies, Trauma and Environmental Emergencies, Special Populations, Evaluations, EMS Operations, and NYC Protocols. Patient assessment and formulation of a field impression, selecting and implementing an appropriate treatment plan for the patient will be continued. Assessment and formulation of field impressions and implementation of an appropriate treatment plan for patients with a wide range of medical complaints including respiratory, cardiovascular, neurological, environmental and obstetrical emergencies. Special skills associated with patient rescue, extrication and movement that are common in the community are covered. These include MVA extrication, water rescue, patient transport and safety from high-rise, subways, and limited space environments.

EMS 23100 Paramedic Clinical III

Credit

2

This course is designed to allow the student to continue individualized experiences in the field of emergency medical services in specific areas of preparatory, airway, patient assessment, trauma, and medical. This course is the third of a four-course clinical sequence. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 24000 Paramedic IV

Credit

5

The course will cover material including Medical Emergencies, Trauma and Environmental Emergencies, Special Populations, Evaluations, EMS Operations, and NYC Protocols. Patient assessment and formulation of a field impression, and selecting and implementing an appropriate treatment plan for neonatal, pediatric and geriatric patients, patients with diverse needs and chronically ill patients. The student will also learn how to safely manage the scene of an emergency. Students will complete nationally recognized Certification instruction for American Heart Association (AHA) Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS) and Neonatal Advanced Life Support (NALS), and Pre-Hospital Trauma Life Support (PHTLS), AAOS Advanced Assessment of Trauma (ATT) and FEMA Weapons of Mass Destruction (WMD) during this course. Students will spend significant amount of time practicing both oral and practical skills. Summative program written examinations are also part of this course.

EMS 24100 Paramedic Clinical IV

Credit

3

This course is designed to allow the student to continue the individualized experience in the field of emergency medical services in specific areas of preparatory, airway, patient assessment, trauma, medical, special considerations, and operations. This course is the fourth of a four-course clinical sequence. As the final clinical course, students must demonstrate leadership skills on calls. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

An outline of the entire 60-credit curriculum follows:

A.A.S. in EMS Curriculum Outline

Course number		Lecture	Lab	Clinic	Credit
EMS 10000	EMT-Basic	3	8		5
EMS 21000	Paramedic I	4	12		7
EMS 22000	Paramedic II	3	8		5
EMS 23000	Paramedic III	4	12		7
EMS 24000	Paramedic IV	3	8		5
EMS 10100	EMT-Basic Clinical I			96	1
EMS 21100	Paramedic Clinical I			144	2
EMS 22100	Paramedic Clinical II			288	3
EMS 23100	Paramedic Clinical III			144	2
EMS 24100	Paramedic Clinical IV			288	3
				960	40

General Education Component of the Paramedic Curriculum

ENG 01200	Freshman English I				3
ENG 02400	Freshman English II				3
BIO 01100	Human Anatomy and Physiology I				4
BIO 01200	Human Anatomy and Physiology II				4
PSY 01100	General Psychology				3
MAT 02000	Elements of Statistics				3
					20

AAS in EMS Full-Time (4 semester) Program of Study
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	CREDITS
Fall / Winter	
ENG 01200 Freshman English I	3
BIO 01100 Human Anatomy and Physiology I	4
EMS 10000 EMT-Basic	5
EMS 10100 EMT-Basic Clinical I*	1
	13
Spring / Summer	
BIO 01200 Human Anatomy and Physiology II	4
MAT 02000 Elements of Statistics	3
PSY 01100 General Psychology	3
ENG 02400 Freshman English II	3
	13
Fall / Winter	
EMS 21000 Paramedic I	7
EMS 21100 Paramedic Clinical I	2
EMS 22000 Paramedic II*	5
EMS 22100 Paramedic Clinical II*	3
	17
Spring / Summer	
EMS 23000 Paramedic III	7
EMS 23100 Paramedic Clinical III	2
EMS 24000 Paramedic IV*	5
EMS 24100 Paramedic Clinical IV*	3
	17

* Uses Winter or Summer module

Total= 60 credits

Cost assessment

Faculty

Associate Professor George Contreras has been appointed to the Department of Nursing as the Allied Health Sciences Department Director responsible for the development, implementation and accreditation of the Paramedic Program. Professor Contreras is AHA certified in ACLS, BCLS and PALS (Advanced, Basic and Pediatric Advanced Life Support), PHTLS, ATT, WMD. He has a B.A. in Psychobiology, a M.S. in Health Services Administration, and a M.P.H. in Community Health Education.

The faculty of Kingsborough's Paramedic Program will meet or exceed the minimum requirements of the CoAEMSP and New York State as follows:

There will be a full-time program director who holds at a minimum, a master's degree; is proficient in instruction, curriculum design, program administration and evaluation, and student advisement; is a New York State Certified Instructor Coordinator and a Senior Instructor. The EMT-B course will be managed by another New York CIC who will have responsibility for that program. The EMT-B can be part-time or full-time and can teach in the Paramedic Program.

There will be a Medical Director who according to the CoAEMSP standards must:

- 1) be a physician currently licensed to practice medicine in New York with experience and current knowledge of emergency care of acutely ill and injured patients,
- 2) have adequate training or experience in the delivery of out-of-hospital emergency care, including the proper care and transport of patients, medical direction, and quality improvement in out-of-hospital care,
- 3) be an active member of the local medical community and participate in professional activities related to out-of-hospital care,
- 4) be knowledgeable about the education of the Emergency Medical Services Professions, including professional, legislative and regulatory issues regarding the education of the Emergency Medical Services Professions.

Other program faculty will be qualified to teach the subject assigned and hold appropriate professional credentials. The Director of Allied Health Sciences will be responsible to recruit the appropriate adjunct faculty to teach and supervise the laboratory and practical sessions of the program.

Facilities, Laboratory Equipment, Supplies and Library Materials

Kingsborough Community College already has an appropriate lab facility created for the new EMT-B program already offered through the Office of Continuing Education. This laboratory and classroom space will need to be augmented for the paramedic program. Each full-time faculty member will have appropriate office space as well. TransCare, other emergency transportation services and emergency medical departments in area hospitals will provide clinical and field training sites

Several professional journals and texts will be added to the Kibbee Library in sufficient numbers to support student assignments. The Library will need to provide on line access to Medline. Usually arrangements can be made with hospitals and medical schools for students to have access to any medical journals or text they may need. Local hospital libraries can be appropriate resources and will meet all national standards as long as these arrangements are established and known to students, including any conditions for access students must follow.

KCC is currently offering the EMT-Basic course through Continuing Education. TransCare Ambulance Service, which serves the Brooklyn and New York area, is the largest private EMS provider in New York City and has a currently approved Certified Instructor Coordinator (CIC), has partnered with Kingsborough Community College. We will work with Trans Care Training Institute so that the success of the Continuing Education EMT-Basic course will become the justification upon which the State will consider Kingsborough's application to offer not only EMT-Basic through Continuing Education, but also the A.A.S. in EMS. TransCare has committed to a lasting partnership from this initial stage through to the implementation of the degree program. TransCare and emergency medical departments in area hospitals (such as Long Island College Hospital, Wyckhoff Hospital and other) will provide clinical and field training sites and be a source of qualified instructors.

A fully equipped EMT-B classroom has been created for the EMT-B program offered by Continuing Education. Under consideration is the acquisition of an ambulance for use as an instructional aid for the EMT programs and as a functional unit for college use in case of an on-campus need. Space will be identified in order to add another fully equipped classroom for the paramedic program. Additional training equipment such as advanced cardiac monitors, training units and advanced training mannequins for IV/IO insertions, endotracheal intubations and other invasive techniques will be acquired.

The administration of the College has demonstrated a significant interest in programs of this type by its recent commitment to associate degree programs for surgical technicians and physical therapist assistants. Each has fully equipped laboratories, office space and highly qualified faculty. The College has a long standing A.A.S. in Nursing program which has 42 faculty, 15 of whom are full-time. In addition to the A.A.S. in Physical Therapist Assistant and the A.A.S. in Surgical Technology, the College offers programs in mental health, community health, therapeutic recreation and transfer options to baccalaureate programs in the health professions. The College fully supports these

programs with sufficient office space, classrooms and learning laboratories and with equipment currently used in the field. The College has also developed a biotechnology program.

In its July 2006 *Report of Institutional Goals* to CUNY, Kingsborough made a commitment to target new certificate and degree programs in health occupations. Currently, Letters of Intent are being prepared for five other health professions programs. These new programs are: Veterinary Technician, Occupational Therapy Assistant, Respiratory Therapist, Radiologic Technology and Pharmacy Technician.

The College is pursuing the creation of a new academic department, to be named the Allied Health Sciences Department, which will be responsible for the A.A.S. in EMS as well as five other new health-related technician programs. During this initial stage between the Letter of Intent and CUNY approval to develop a full proposal, and until a new department is established, the Department of Nursing has taken responsibility for the development of the A.A.S. in EMS which will be the paramedic program.

Annual budgets for typical paramedic programs include on-going disposable supplies as well as training equipment for the laboratory and classroom, continuing education for faculty, accreditation fees and other miscellaneous items. Some of the equipment for a typical paramedic program can be acquired by donation, rented or borrowed. The cost of equipping a paramedic learning laboratory can approach \$350,000 (see table below). The cost of a full-time instructor and program director, plus a medical director and the minimum of an adjunct EMT-B instructor, will total approximately \$180,000.

First Year Start Up Equipment Costs

Item	Unit cost	Quantity	Total cost
EMS stretchers	2,000	4	8,000
Crash Kelly	2,500	5	12,500
Ultimate Hurt	4,500	5	22,500
Megacode Kelly	10,000	5	50,000
Airway-adult	1,500	5	7,500
Airway-peds	500	4	2,000
Pneumothorax trainer	1,000	5	5,000
Cricoid stick trainer	500	5	2,500
Cardiac monitors	30,000	3	90,000
ALS simulator	10,000	2	20,000
Sim Man	35,000	1	35,000
Sim Baby	35,000	1	35,000
IV/IO arm	500	10	5,000
BP training arm	1,000	5	5,000
12 lead trainer	10,000	5	50,000
Total			\$350,000

The College plans to use Perkins funds and other grant money raised or acquired for this purpose to support the development of the Paramedic program. The College will provide the funds from its operating budget for faculty salaries and any equipment and supplies which cannot be purchased through any other funding source. This plan is reflected in the Revenue and Expenditure Projection tables on the following pages.

APPENDIX A
STANDARDS OF PRACTICE IN EMERGENCY
MEDICAL SERVICES (CAAHEP)



Commission on Accreditation of Allied Health Education Programs

Standards and Guidelines *for the Accreditation of Educational Programs in the Emergency Medical Services Professions*

*Essentials/Standards initially adopted in 1978;
revised in 1989, 1999, and 2005*

*Adopted by the
American Ambulance Association
American Academy of Pediatrics
American College of Cardiology Foundation
American College of Emergency Physicians
American College of Osteopathic Emergency Physicians
American College of Surgeons
American Society of Anesthesiologists
Commission on Accreditation of Allied Health Education Programs
International Association of Fire Chiefs
National Association of EMS Physicians
National Association of Emergency Medical Services Educators
National Association of Emergency Medical Technicians
National Association of State Emergency Medical Services Directors
National Registry of Emergency Medical Technicians*

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) accredits programs upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

These accreditation Standards are the minimum standards of quality used in accrediting programs that prepare individuals to enter the Emergency Medical Services Professions. The accreditation **Standards** therefore constitute the minimum requirements to which an accredited program is held accountable.

Standards are printed in regular typeface in outline form. *Guidelines* are printed in *italic* typeface in narrative form.

Preamble

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) and American Academy of Pediatrics, American College of Cardiology, American College of Emergency Physicians, American College of Osteopathic Emergency Physicians, American College of Surgeons, American Society of Anesthesiologists, National Association of Emergency Medical Services Educators, National Association of Emergency Medical Technicians, National Association of State Emergency Medical Services Directors, and National Registry of Emergency Medical Technicians cooperate to establish, maintain and promote appropriate standards of quality for educational programs in the Emergency Medical Services Professions and to provide recognition for educational programs that meet or exceed the minimum standards outlined in these accreditation **Standards**. Lists of accredited programs are published for the information of students, employers, educational institutions and agencies, and the public.

These standards are to be used for the development, evaluation, and self-analysis of Emergency Medical Services Professions programs. On-site review teams assist in the evaluation of a program's relative compliance with the accreditation **Standards**.

Description of the Emergency Medical Services Professions

The Emergency Medical Services Professions include four levels: EMT-Paramedic, EMT-Intermediate, EMT-Basic, and First Responder. CAAHEP accredits educational programs at the EMT-Paramedic and EMT-Intermediate levels. Programs at the EMT-Basic and First Responder levels may be included as exit points in CAAHEP-accredited EMT-Paramedic and EMT-Intermediate programs. “Stand-alone” EMT-Basic and First Responder programs are reviewed by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

- **Emergency Medical Technician-Paramedic**

Emergency Medical Technician Paramedics have fulfilled prescribed requirements by a credentialing agency to practice the art and science of out-of-hospital medicine in conjunction with medical direction. Through performance of assessments and providing medical care, their goal is to prevent and reduce mortality and morbidity due to illness and injury. Emergency Medical Technician-Paramedics primarily provide care to emergency patients in an out-of-hospital setting.

Emergency Medical Technician-Paramedics possess the knowledge, skills and attitudes consistent with the expectations of the public and the profession. Emergency Medical Technician-Paramedics recognize that they are an essential component of the continuum of care and serve as linkages among health resources.

Emergency Medical Technician-Paramedics strive to maintain high quality, reasonable cost health care by delivering patients directly to appropriate facilities. As an advocate for patients, Emergency Medical Technician-Paramedics seek to be proactive in affecting long term health care by working in conjunction with other provider agencies, networks, and organizations. The emerging roles and responsibilities of the Emergency Medical Technician-Paramedic include public education, health promotion, and participation in injury and illness prevention programs. As the scope of service continues to expand, the Emergency Medical Technician-Paramedic will function as a facilitator of access to care, as well as an initial treatment provider.

Emergency Medical Technician-Paramedics are responsible and accountable to medical direction, the public, and their peers. Emergency Medical Technician-Paramedics recognize the importance of research and actively participate in the design, development, evaluation and publication of research. Emergency Medical Technician-Paramedics seek to take part in life-long professional development, peer evaluation, and assume an active role in professional and community organizations.

- **Emergency Medical Technician-Intermediate**

EMT-Intermediates have fulfilled prescribed requirements by a credentialing agency to practice the art and science of out-of-hospital medicine in conjunction with medical direction. Through performance of assessments and providing medical care, their goal is to prevent and reduce mortality and morbidity due to illness and injury for emergency patients in the out-of-hospital setting.

EMT-Intermediates possess the knowledge, skills and attitudes consistent with the expectations of the public and the profession. EMT-Intermediates recognize that they are an essential component of the continuum of care and serve as a link for emergency patients to acute care resources.

The primary roles and responsibilities of EMT-Intermediates are to maintain high quality, out-of-hospital emergency care. Ancillary roles of the EMT-Intermediate may include public education and health promotion programs as deemed appropriate by the community.

EMT-Intermediates are responsible and accountable to medical direction, the public, and their peers. EMT-Intermediates recognize the importance of research. EMT-Intermediates seek to take part in life-long professional development, peer evaluation, and assume an active role in professional and community organizations.

- **Emergency Medical Technician-Basic**

EMT-Basics have fulfilled prescribed requirements by a credentialing agency to practice the art and science of out-of-hospital medicine in conjunction with medical direction. Through performance of assessments and providing medical care, their goal is to prevent and reduce mortality and morbidity due to illness and injury for emergency patients in the out-of-hospital setting.

EMT-Basics possess the knowledge, skills and attitudes consistent with the expectations of the public and the profession. EMT-Basics recognize that they are an essential component of the continuum of care and serve as a link for emergency patients to acute care resources.

The primary roles and responsibilities of EMT-Basics are to maintain high quality, out-of-hospital emergency care. Ancillary roles of the EMT-Basic may include public education and health promotion programs as deemed appropriate by the community.

EMT-Basics are responsible and accountable to medical direction, the public, and their peers. EMT-Basics recognize the importance of research. EMT-Basics seek to take part in life-long professional development, peer evaluation, and assume an active role in professional and community organizations.

- **First Responder**

First Responders have fulfilled prescribed requirements by a credentialing agency to practice the art and science of out-of-hospital medicine in conjunction with medical direction. Through performance of assessments and providing medical care, their goal is to prevent and reduce mortality and morbidity due to illness and injury for emergency patients in the out-of-hospital setting.

First Responders possess the knowledge, skills and attitudes consistent with the expectations of the public and the profession. First Responders recognize that they are an essential component of the continuum of care and serve as a link for emergency patients to acute care resources.

The primary roles and responsibilities of First Responders are to maintain high quality, out-of-hospital emergency care. Ancillary roles of the First Responder may include public education and health promotion programs as deemed appropriate by the community.

First Responders are responsible and accountable to medical direction, the public, and their peers. First Responders recognize the importance of research. First Responders seek to take part in life-long professional development, peer evaluation, and assume an active role in professional and community organizations.

I. Sponsorship

A. Sponsoring Institution

A sponsoring institution must be at least one of the following:

1. A post-secondary academic institution accredited by an institutional accrediting agency or equivalent that is recognized by the U.S. Department of Education, and must be authorized under applicable law or other acceptable authority to provide a post-secondary program or to approve college credit, which awards a minimum of a certificate at the completion of the program.
2. A foreign post-secondary academic institution acceptable to CAAHEP.
3. A hospital, clinic or medical center accredited by a healthcare accrediting agency or equivalent that is recognized by the U.S. Department of Health and Human Services, and authorized under applicable law or other acceptable authority to provide healthcare, which is affiliated with an accredited post-secondary educational institution or equivalent or an accredited graduate medical education program, which awards a minimum of a certificate at the completion of the program.
4. A branch of the U.S. Armed Forces or other governmental educational or medical service, which is affiliated with an accredited post-secondary educational institution or equivalent that is authorized under applicable law or other acceptable authority to provide a post-secondary educational program which awards a minimum of a certificate at the completion of the program, or a national organization authorized under applicable law or other acceptable authority to approve college credit.

B. Consortium Sponsor

1. A consortium sponsor is an entity consisting of two or more members that exists for the purpose of operating an educational program. In such instances, at least one of the members of the consortium must meet the requirements of a sponsoring educational institution as described in I, A.
2. The responsibilities of each member of the consortium must be clearly documented as a formal affiliation agreement or memorandum of understanding, which includes governance and lines of authority.

C. Responsibilities of Sponsor

The Sponsor must assure that the provisions of these **Standards** are met.

II. Program Goals

A. Program Goals and Outcomes

There must be a written statement of the program's goals and learning domains consistent with and responsive to the demonstrated needs and expectations of the various communities of interest served by the educational program. The communities of interest that are served by the program include, but are not limited to, students, graduates, faculty, sponsor administration, hospital/clinic representatives, physicians, employers, police and fire services, key governmental officials, the public, and nationally accepted standards for roles and functions.

Program-specific statements of goals and learning domains provide the basis for program planning, implementation, and evaluation. Such goals and learning domains must be compatible with both the mission of the sponsoring institution(s) and the expectations of the communities of interest. Goals and learning domains are based upon the substantiated needs of health care providers and employers, and the educational needs of the students served by the educational program.

B. Appropriateness of Goals and Learning Domains

The program must regularly assess its goals and learning domains. Program personnel must identify and respond to changes in the needs and/or expectations of its communities of interest.

An advisory committee, which is representative of these communities of interest, must be designated and charged with the responsibility of meeting at least annually, to assist program and sponsor personnel in formulating and periodically revising appropriate goals and learning domains, monitoring needs and expectations, and ensuring program responsiveness to change.

Hospital/clinic representatives should include supervisory and administrative personnel to whom the students or graduates deliver their patients and who provide training sites for students;

Physician representatives should include the emergency physicians to whom students and/or graduates deliver their patients as well as trauma surgeons, internists, cardiologists, pediatricians, and family physicians;

Employer representatives should include employers of the program graduates and the ambulance supervisory personnel and administrative personnel where the students perform internships;

Key governmental official representatives should include state and/or regional training coordinators/field representatives.

C. Minimum Expectations

The program must have the following goal(s) defining minimum expectations:

- Emergency Medical Technician-Paramedic

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

- Emergency Medical Technician-Intermediate

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

Programs adopting educational goals beyond entry-level competence must clearly delineate this intent and provide evidence that all students have achieved the basic competencies prior to entry into the field.

Programs not offering Associate's or Bachelor's degrees are encouraged to establish articulation agreements that provide for maximum transfer of clinical and clinically related coursework. Coursework in general education, social sciences, and health sciences should parallel coursework offered in colleges and universities.

III. Resources

A. Type and Amount

1. Program Resources

Program resources must be sufficient to ensure the achievement of the program's goals and outcomes. Resources include, but are not limited to: faculty, clerical/support staff, curriculum, finances, classroom/laboratory facilities, ancillary student facilities, hospital/clinical affiliations, field/internship affiliations, equipment/supplies, computer resources, instructional reference materials, and faculty/staff continuing education.

For most programs, there should be a full-time clerical position that reports to the program director.

Instructional aids may include clinical specimens, documents and related materials, reference materials, equipment, and demonstration aids

2. Hospital/Clinical Affiliations and Field/Internship Affiliations

For all affiliations students shall have access to adequate numbers of patients, proportionally distributed by illness, injury, gender, age, and common problems encountered in the delivery of emergency care appropriate to the level of the Emergency Medical Services Profession(s) for which training is being offered.

Hospital/clinical experiences of the program should include the operating room, recovery room, intensive care unit, coronary care unit, labor and delivery room, pediatrics, and emergency department, and include exposure to an adequate number of pediatric, obstetric, psychiatric, and geriatric patients.

B. Personnel

The sponsor must appoint sufficient faculty and staff with the necessary qualifications to perform the functions identified in documented job descriptions and to achieve the program's stated goals and outcomes.

1. Program Director

a. Responsibilities

The program director must be responsible for all aspects of the program, including, but not limited to:

- 1) the administration, organization, and supervision of the educational program,
- 2) the continuous quality review and improvement of the educational program,
- 3) long range planning and ongoing development of the program,
- 4) the effectiveness of the program and have systems in place to demonstrate the effectiveness of the program,

- 5) cooperative involvement with the medical director,
- 6) adequate controls to assure the quality of the delegated responsibilities.

b. Qualifications

The program director must:

- 1) possess a minimum of an Associate's degree for Emergency Medical Technician-Intermediate and a minimum of a Bachelor's degree for Emergency Medical Technician-Paramedic from a regionally accredited institution of higher education,

The program director should possess a Bachelor's degree or higher for Emergency Medical Technician-Intermediate and a Master's degree or higher degree for Emergency Medical Technician-Paramedic from a regionally accredited institution of higher education.

- 2) have appropriate medical or allied health education, training, and experience,
- 3) be knowledgeable about methods of instruction, testing and evaluation of students,
- 4) have field experience in the delivery of out-of-hospital emergency care,
- 5) have academic training and preparation related to emergency medical services at least equivalent to that of program graduates,

The program director should be currently certified in the United States to practice out-of-hospital care and currently certified by a nationally recognized certifying organization at an equal or higher level of professional training than that for which training is being offered.

- 6) be knowledgeable concerning current national curricula, national accreditation, national registration, and the requirements for state certification or licensure.

2. **Medical Director**

a. Responsibilities

The medical director must be responsible for all medical aspects of the program, including but not limited to:

- 1) review and approval of the educational content of the program curriculum to certify its ongoing appropriateness and medical accuracy,
- 2) review and approval of the quality of medical instruction, supervision, and evaluation of the students in all areas of the program,
- 3) review and approval of the progress of each student throughout the program and assist in the development of appropriate corrective measures when a student does not show adequate progress,
- 4) assurance of the competence of each graduate of the program in the cognitive, psychomotor, and affective domains,
- 5) responsibility for cooperative involvement with the program director,
- 6) adequate controls to assure the quality of the delegated responsibilities.

For most programs, the medical director should commit a significant amount of time to the program, for which appropriate compensation is often necessary.

b. **Qualifications**

The medical director must:

- 1) be a physician currently licensed to practice medicine within the United States and currently authorized to practice within the geographic area served by the program, with experience and current knowledge of emergency care of acutely ill and injured patients,
- 2) have adequate training or experience in the delivery of out-of-hospital emergency care, including the proper care and transport of patients, medical direction, and quality improvement in out-of-hospital care,
- 3) be an active member of the local medical community and participate in professional activities related to out-of-hospital care,
- 4) be knowledgeable about the education of the Emergency Medical Services Professions, including professional, legislative and regulatory issues regarding the education of the Emergency Medical Services Professions.

3. Faculty

a. **Responsibilities**

In each location where students are assigned for didactic or clinical instruction or supervised practice, there must be instructional faculty designated to coordinate supervision and provide frequent assessments of the students' progress in achieving acceptable program requirements.

b. **Qualifications**

The faculty must be knowledgeable in course content and effective in teaching their assigned subjects, and capable through academic preparation, training and experience to teach the courses or topics to which they are assigned.

For most programs, there should be a faculty member to assist in teaching and/or clinical coordination in addition to the program director. The faculty member should be certified by a nationally recognized certifying organization at an equal or higher level of professional training than the Emergency Medical Services Profession(s) for which training is being offered.

C. Curriculum

1. The curriculum must ensure the achievement of program goals and learning domains. Instruction must be an appropriate sequence of classroom, laboratory, clinical, and field/internship activities. Instruction must be based on clearly written course syllabi describing learning goals, course objectives, and competencies required for graduation.

The program must demonstrate by comparison that the curriculum offered meets or exceeds the content and competency demands of the latest edition of the United States Department of Transportation, National Highway Traffic Safety Administration, National Emergency Medical Services Core Content, Scope of Practice Model, and Education Standards, and the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions Curriculum Supplement.

- *Emergency Medical Technician-Paramedic*

Accredited programs typically range from 1000-1300 clock hours, including the four integrated phases of education (didactic, laboratory, and clinical and field) to cover the stated curriculum. Further pre-requisites and/or co-requisites may be required to address competencies in basic health sciences (Anatomy and Physiology) and in basic academic skills (English and Mathematics) and together with the core content of the Emergency Medical Technician-Basic and Emergency Medical Technician-Paramedic curricula may lead to an academic degree.

- *Emergency Medical Technician-Intermediate*

The current national curriculum recommends 300-400 clock hours, including the four integrated phases of education (didactic, laboratory, and clinical and field) to cover the stated curriculum. Further pre-requisites and /or co-requisites may be required to address competencies in basic health sciences (Anatomy and Physiology) and in basic academic skills (English and Mathematics) and together with the core content of the Emergency Medical Technician-Basic and the Emergency Medical Technician-Intermediate curricula may lead to an academic certificate or degree.

For those programs offering an exit point at the Emergency Medical Technician-Basic level, the current national curriculum for Emergency Medical Technician-Basic recommends 110 clock hours of integrated didactic and laboratory instruction. Clinical/field rotations should be of sufficient length to allow students to interview and assess a minimum of five patients. For those programs offering an exit point at the First Responder level, the current national curriculum for First Responder recommends 40 clock hours of integrated didactic and laboratory instruction. For further details on these curricula, see the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions website at www.CoAEMSP.org.

2. The program must track the number of times each student successfully performs each of the competencies required for the appropriate exit point according to patient age, pathologies, complaint, gender, and interventions.
3. The field internship must provide the student with an opportunity to serve as team leader in a variety of pre-hospital advanced life support emergency medical situations.

Enough of the field internship should occur following the completion of the didactic and clinical phases of the program to assure that the student has achieved the desired didactic and clinical competencies of the curriculum prior to the commencement of the field internship. Some didactic material may be taught concurrent with the field internship.

D. Resource Assessment

The program must, at least annually, assess the appropriateness and effectiveness of the resources described in these standards. The results of resource assessment must be the basis for ongoing planning and appropriate change. An action plan must be developed when deficiencies are identified in the program resources. Implementation of the action plan must be documented and results measured by ongoing resource assessment.

IV. Student and Graduate Evaluation/Assessment

A. Student Evaluation

1. Frequency and Purpose

Evaluation of students must be conducted on a recurrent basis and with sufficient frequency to provide both the students and program faculty with valid and timely indications of the students' progress toward and achievement of the competencies and learning domains stated in the curriculum.

2. Documentation

Records of student evaluations must be maintained in sufficient detail to document learning progress and achievements.

B. Outcomes

1. Outcomes Assessment

The program must periodically assess its effectiveness in achieving its stated goals and learning domains. The results of this evaluation must be reflected in the review and timely revision of the program.

Outcomes assessments include but are not limited to: exit point completion, graduate satisfaction, employer satisfaction, job placement, state licensing examinations and/or national registration.

2. Outcomes Reporting

The program must periodically submit its goal(s), learning domains, evaluation systems (including type, cut score, validity, and reliability), outcomes, its analysis of the outcomes and an appropriate action plan based on the analysis.

Program evaluation should utilize certification examinations developed by an independent national organization that employ cut scores based upon a valid psychometric formula which judges entry level competence and uses practice analysis consistent with the description of the profession. Examinations should be national in scope with uniform passing standards and statistical reports. Cognitive instruments should reflect the Standards for Educational and Psychological Testing of the American Psychological Association. Psychomotor evaluations should be course ending, should be conducted by personnel not directly involved in student education, and should have a defined method of administration well known to students. Affective domain instruments should be approved by the program's communities of interest and should be tied to employer and graduate surveys.

Program evaluation should be a continuing and systematic process with internal and external curriculum validation in consultation with employers, faculty, preceptors, students and graduates. Other dimensions of the program may merit consideration such as the admission criteria and process, the curriculum design, and the purpose and productivity of an advisory committee.

V. Fair Practices

A. Publications and Disclosure

1. Announcements, catalogs, publications, and advertising must accurately reflect the program offered.
2. At least the following must be made known to all applicants and students: the sponsor's institutional and programmatic accreditation status as well as the name, address and phone number of the accrediting agencies, admissions policies and practices, including technical standards related to the functional job analysis(es) of the Emergency Medical Services Profession(s) for which training is being offered; policies on advanced placement, transfer of credits, and credits for experiential learning; number of credits required for completion of the program; tuition/fees and other costs required to complete the program; policies and processes for withdrawal and for refunds of tuition/fees.
3. At least the following must be made known to all students: academic calendar, student grievance procedure, criteria for successful completion of each segment of the curriculum and graduation, and policies and processes by which students may perform clinical work while enrolled in the program.

B. Lawful and Non-discriminatory Practices

All activities associated with the program, including student and faculty recruitment, student admission, and faculty employment practices, must be non-discriminatory and in accord with federal and state statutes, rules, and regulations. There must be a faculty grievance procedure made known to all paid faculty.

C. Safeguards

The health and safety of patients, students, and faculty associated with the educational activities of the students must be adequately safeguarded. All activities required in the program must be educational and students must not be substituted for staff.

Medical control/accountability exists when there is unequivocal evidence that Emergency Medical Services Professionals are not operating as independent practitioners, and when Emergency Medical Services Professionals are under direct medical control or in a system utilizing standing orders where timely medical audit and review provide for quality assurance.

D. Student Records

Satisfactory records must be maintained for student admission, advisement, counseling, and evaluation. Grades and credits for courses must be recorded on the student transcript and permanently maintained by the sponsor in a safe and accessible location.

E. Substantive Change

The sponsor must report substantive changes as described in Appendix A to CAAHEP/CoAEMSP in a timely manner. Additional substantive changes to be reported to CoAEMSP within the time limits prescribed include: change in program status, sponsorship, or administrative personnel.

F. Agreements

There must be a formal affiliation agreement or memorandum of understanding between the sponsor and all other entities that participate in the education of the students describing the relationship, role, and responsibilities between the sponsor and that entity.

Entities that participate include: hospital/clinical sites and field/internship sites.

APPENDIX A

Application, Maintenance and Administration of Accreditation

A. Program and Sponsor Responsibilities

1. Applying for Initial Accreditation

- a. The chief executive officer or an officially designated representative of the sponsor completes a “Request for Accreditation Services” form and returns it to:

CoAEMSP
4101 W. Green Oaks Blvd. – Suite 305-599
Arlington, TX 76016

The “Request for Accreditation Services” form can be obtained from CoAEMSP, CAAHEP, or the CAAHEP website at www.caahep.org.

Note: There is no CAAHEP fee when applying for accreditation services; however, individual committees on accreditation may have an application fee.

- b. The program undergoes a comprehensive review, which includes a written self-study report and an on-site review.

The self-study instructions and report form are available from the CoAEMSP. The on-site review will be scheduled in cooperation with the program and once the self-study report has been completed, submitted, and accepted by the CoAEMSP.

2. Applying for Continuing Accreditation

- a. Upon written notice from the CoAEMSP, the chief executive officer or an officially designated representative of the sponsor completes a “Request for Accreditation Services” form, and returns it to:

CoAEMSP
4101 W. Green Oaks Blvd. – Suite 305-599
Arlington, TX 76016

- b. The program may undergo a comprehensive review in accordance with the policies and procedures of the CoAEMSP.

If it is determined that there were significant concerns with the on-site review, the sponsor may request a second site visit with a different team.

After the on-site review team submits a report of its findings, the sponsor is provided the opportunity to comment in writing and to correct factual errors prior to the CoAEMSP forwarding a recommendation to CAAHEP.

3. Administrative Requirements for Maintaining Accreditation

- a. The program must inform the CoAEMSP and CAAHEP within a reasonable period of time (as defined by the CoAEMSP and CAAHEP policies) of changes in their chief executive officer, dean of health professions or equivalent position, and required program personnel.
- b. The sponsor must inform CAAHEP and the CoAEMSP of its intent to transfer program sponsorship. To begin the process for a Transfer of Sponsorship, the current sponsor must submit a letter (signed by the CEO or designated individual) to CAAHEP and the CoAEMSP that it is relinquishing its sponsorship of the program. Additionally, the new sponsor must submit a "Request for Transfer of Sponsorship Services" form. The CoAEMSP has the discretion of requesting a new self-study report with or without an on-site review. Applying for a transfer of sponsorship does not guarantee that the transfer of accreditation will be granted.
- c. The sponsor must promptly inform CAAHEP and the CoAEMSP of any adverse decision affecting its accreditation by recognized institutional accrediting agencies and/or state agencies (or their equivalent).
- d. Comprehensive reviews are scheduled by the CoAEMSP in accordance with its policies and procedures. The time between comprehensive reviews is determined by the CoAEMSP and based on the program's ongoing compliance with the **Standards**, however, all programs must undergo a comprehensive review at least once every ten years.
- e. The program and the sponsor must pay CoAEMSP and CAAHEP fees within a reasonable period of time, as determined by the CoAEMSP and CAAHEP respectively.
- f. The sponsor must file all reports in a timely manner (self-study report, progress reports, annual reports, etc.) in accordance with CoAEMSP policy.
- g. The sponsor must agree to a reasonable on-site review date that provides sufficient time for CAAHEP to act on a CoAEMSP accreditation recommendation prior to the "next comprehensive review" period, which was designated by CAAHEP at the time of its last accreditation action, or a reasonable date otherwise designated by the CoAEMSP.

Failure to meet any of the aforementioned administrative requirements may lead to administrative probation and ultimately to the withdrawal of accreditation. CAAHEP will immediately rescind administrative probation once all administrative deficiencies have been rectified.

4. Voluntary Withdrawal of a CAAHEP-Accredited Program

Voluntary withdrawal of accreditation from CAAHEP may be requested at any time by the chief executive officer or an officially designated representative of the sponsor writing to CAAHEP indicating: the last date of student enrollment, the desired effective date of the voluntary withdrawal, and the location where all records will be kept for students who have completed the program.

5. Requesting Inactive Status of a CAAHEP-Accredited Program

Inactive status may be requested from CAAHEP at any time by the chief executive officer or an officially designated representative of the sponsor writing to CAAHEP indicating the desired date to become inactive. No students can be enrolled or matriculated in the program at any time during the time period in which the program is on inactive status. The maximum period for inactive status is two years. The sponsor must continue to pay all required fees to the CoAEMSP and CAAHEP to maintain its accreditation status.

To reactivate the program the Chief Executive Officer or an officially designated representative of the sponsor must notify CAAHEP of its intent to do so in writing to both CAAHEP and the CoAEMSP. The sponsor will be notified by the CoAEMSP of additional requirements, if any, that must be met to restore active status.

If the sponsor has not notified CAAHEP of its intent to re-activate a program by the end of the two-year period, CAAHEP will consider this a "Voluntary Withdrawal of Accreditation."

B. CAAHEP and Committee on Accreditation Responsibilities – Accreditation Recommendation Process

1. After a program has had the opportunity to comment in writing and to correct factual errors on the on-site review report, the CoAEMSP forwards a status of public recognition recommendation to the CAAHEP Board of Directors. The recommendation may be for any of the following statuses: initial accreditation, continuing accreditation, transfer of sponsorship, probationary accreditation, withhold accreditation, or withdraw accreditation.

The decision of the CAAHEP Board of Directors is provided in writing to the sponsor immediately following the CAAHEP meeting at which the program was reviewed and voted upon.

2. Before the CoAEMSP forwards a recommendation to CAAHEP that a program be placed on probationary accreditation, the sponsor must have the opportunity to request reconsideration of that recommendation or to request voluntary withdrawal of accreditation. The CoAEMSP reconsideration of a recommendation for probationary accreditation must be based on conditions existing both when the committee arrived at its recommendation as well as on subsequent documented evidence of corrected deficiencies provided by the sponsor.

The CAAHEP Board of Directors' decision to confer probationary accreditation is not subject to appeal.

3. Before the CoAEMSP forwards a recommendation to CAAHEP that a program's accreditation be withdrawn or that accreditation be withheld, the sponsor must have the opportunity to request reconsideration of the recommendation, or to request voluntary withdrawal of accreditation or withdrawal of the accreditation application, whichever is applicable. The CoAEMSP reconsideration of a recommendation of withdraw or withhold accreditation must be based on conditions existing both when the CoAEMSP arrived at its recommendation as well as on subsequent documented evidence of corrected deficiencies provided by the sponsor.

The CAAHEP Board of Directors' decision to withdraw or withhold accreditation may be appealed. A copy of the CAAHEP "Appeal of Adverse Accreditation Actions" is enclosed with the CAAHEP letter notifying the sponsor of either of these actions.

At the completion of due process, when accreditation is withheld or withdrawn, the sponsor's chief executive officer is provided with a statement of each deficiency. Programs are eligible to re-apply for accreditation once the sponsor believes that the program is in compliance with the accreditation **Standards**.

Any student who completes a program that was accredited by CAAHEP at any time during his/her matriculation is deemed by CAAHEP to be a graduate of a CAAHEP-accredited program.

**APPENDIX B
COURSE DESCRIPTIONS
FOR REQUIRED NEW COURSES**

EMS 10000 Emergency Medical Technician-Basic

Credit

5

The course will cover introductory material including overview of Emergency Medical Services (EMS), EMS Systems, Roles and Responsibilities of the Emergency Medical Technician (EMT) and Paramedic, and Anatomy & Physiology, Pathophysiology and Airway Management, clinical pre-hospital pharmacology, shock and resuscitation, medical and trauma assessments, special populations, EMS operations and a special section on how to assist paramedics in the field. Lab work involves bleeding control, CPR, patient assessment, splinting and patient movement techniques. Skills are subsequently demonstrated and practiced in the laboratory, hospital and/or the field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 10100 EMT-Basic Clinical I

Credit

1

This course is designed to introduce the student to individualized experience in the field of emergency medical services in specific areas of preparatory, airway, patient assessment, trauma, medical, special considerations, and operations from the perspective of an EMT. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 21000 Paramedic I

Credit

7

The course will cover material including Introduction to Advanced Prehospital Care, EMS Systems, Roles and Responsibilities of the Paramedic and Medical/Legal Aspects of Advanced Prehospital Care, and Anatomy & Physiology, Pathophysiology and Advanced Airway Management. Clinical pre-hospital pharmacology, IV access and advanced airway management techniques are introduced. Lab work involves IV access techniques, endotracheal intubation, computing dosages, preparing medications for administration and practice in all administrative techniques. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course. In addition, students will practice BLS skills including Patient Assessment, Bleeding and Fracture

Management.

EMS 21100 Paramedic Clinical I

Credit

2

This course is designed to introduce the student to individualized experience in the field of emergency medical services in specific areas of preparatory, airway and become familiar with hospital departments and ambulance operations. This course is the first of a four-course clinical sequence. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 22000 Paramedic II

Credit

5

The course will cover material including Patient Assessment, Pharmacology, Airway and Medical Emergencies. Patient assessment and formulation of a field impression, selecting and implementing an appropriate treatment plan for the patient will be emphasized. Skills related to the practice of advanced pre-hospital care are demonstrated, learned and practiced in the laboratory/hospital/field. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 22100 Paramedic Clinical II

Credit

3

This course is designed to allow the student to continue the individualized experience in the field of emergency medical services in specific areas of preparatory, airway. This course is the second of a four-course clinical sequence. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 23000 Paramedic III

Credit**7**

The course will cover material including Medical Emergencies, Trauma and Environmental Emergencies, Special Populations, Evaluations, EMS Operations, and NYC Protocols. Patient assessment and formulation of a field impression, selecting and implementing an appropriate treatment plan for the patient will be continued. Assessment and formulation of field impressions and implementation of an appropriate treatment plan for patients with a wide range of medical complaints including respiratory, cardiovascular, neurological, environmental and obstetrical emergencies. Special skills associated with patient rescue, extrication and movement that are common in the community are covered. These include MVA extrication, water rescue, patient transport and safety from high-rise, subways, and limited space environments.

EMS 23100 Paramedic Clinical III**Credit****2**

This course is designed to allow the student to continue individualized experiences in the field of emergency medical services in specific areas of preparatory, airway, patient assessment, trauma, and medical. This course is the third of a four-course clinical sequence. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

EMS 24000 Paramedic IV**Credit****5**

The course will cover material including Medical Emergencies, Trauma and Environmental Emergencies, Special Populations, Evaluations, EMS Operations, and NYC Protocols. Patient assessment and formulation of a field impression, and selecting and implementing an appropriate treatment plan for neonatal, pediatric and geriatric patients, patients with diverse needs and chronically ill patients. The student will also learn how to safely manage the scene of an emergency. Students will complete nationally recognized Certification instruction for American Heart Association (AHA) Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS) and Neonatal Advanced Life Support (NALS), and Pre-Hospital Trauma Life Support (PHTLS), AAOS Advanced Assessment of Trauma (ATT) and FEMA Weapons of Mass Destruction (WMD) during this course. Students will spend significant amount of time practicing both oral and practical skills. Summative program written examinations are also part of this course.

EMS 24100 Paramedic Clinical IV

Credit**3**

This course is designed to allow the student to continue the individualized experience in the field of emergency medical services in specific areas of preparatory, airway, patient assessment, trauma, medical, special considerations, and operations. This course is the fourth of a four-course clinical sequence. As the final clinical course, students must demonstrate leadership skills on calls. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

**APPENDIX C
PROGRAM REQUIREMENTS
(SED FORM)**

Program Content and Requirements		Please place an x in the appropriate column		
List each course required for the college core (if applicable)	Course Number and Course Title*	No. of Credits	Is this a new course?	Is this a revised course?
	ENG 01200 Freshman English I	3		
	ENG 02400 Freshman English II	3		
	BIO 01100 Human Anatomy and Physiology I	4		
	BIO 01200 Human Anatomy and Physiology II	4		
	PSY 01100 General Psychology	3		
	MAT 02000 Elements of Statistics	3		
	List each course required for the major (include any field experience, research, thesis, or capstone course)	EMS 01000- Emergency Medical Technician Basic	5	X
EMS 01010- Emergency Medical Technician Clinical		1	X	
EMS 02100- Paramedic I		7	X	
EMS 02110- Paramedic Clinical I		2	X	
EMS 02200- Paramedic II		5	X	
EMS 02210- Paramedic Clinical II		3	X	
EMS 02300- Paramedic III		7	X	
EMS 02310- Paramedic Clinical III		5	X	
EMS 02400- Paramedic IV		5	X	
EMS 02410- Paramedic Clinical IV		3	X	

* MOST UNDERGRADUATE DEGREE TITLES REQUIRE A SPECIFIED PERCENTAGE OF LIBERAL ARTS CONTENT (FOR EXAMPLE, AA, BA REQUIRE 75%; AS, BS, BSED REQUIRE 50%; AAS REQUIRES 33%). WITHIN THE TABLE, IDENTIFY WITH AN ASTERISK ALL COURSES THAT ARE CONSIDERED LIBERAL ARTS AND SCIENCES.

**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK**

- 1. DEPARTMENT, COURSE NUMBER AND TITLE:**
Nursing, EMS 10000, Emergency Medical Technician Basic
- 2. DOES THIS COURSE MEET DISTRIBUTION REQUIREMENTS FOR GROUPS I-V? IF SO, WHICH GROUP? N/A**
- 3. TRANSFERABILITY OF THIS COURSE. DESCRIBE HOW THIS COURSE TRANSFERS: N/A**
- 4. BULLETIN DESCRIPTION OF COURSE:**
The course will cover introductory material including overview of Emergency Medical Services (EMS), EMS Systems, Roles and Responsibilities of the Emergency Medical Technician (EMT) and Paramedic, and Anatomy & Physiology, Pathophysiology and Airway Management, clinical pre-hospital pharmacology, shock and resuscitation, medical and trauma assessments, special populations, EMS operations and a special section on how to assist paramedics in the field. Lab work involves bleeding control, CPR, patient assessment, splinting and patient movement techniques. Skills are subsequently demonstrated and practiced in the laboratory, hospital and/or the field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.
- 5. NUMBER OF WEEKLY CLASS HOURS** (please indicate the number of hours per week spent in a lab, hours spent on site doing fieldwork, hours of supervision and hours in classroom-- if applicable):
8 lab hours, 3 lec hours
- 6. NUMBER OF CREDITS: 5**
- 7. COURSE PREREQUISITES AND COREQUISITES**

A. PREREQUISITES:	NONE
B. COREQUISITES:	ENG 12, BIO 11
C. PRE OR COREQ:	NONE
- 8. BRIEF RATIONALE TO JUSTIFY PROPOSED COURSE TO INCLUDE:**
There is a need for more certified prehospital care providers. It is necessary to appropriately prepare students with knowledge and skills for them to succeed. This course will provide the student a basic understanding of emergency medical care at the first level of prehospital care.
- 9. LIST OF COURSES, IF ANY, TO BE WITHDRAWN WHEN COURSE(S) IS (ARE) ADOPTED: N/A**
- 10. IF COURSE IS AN INTERNSHIP OR INDEPENDENT STUDY OR THE LIKE, PROVIDE AN**

EXPLANATION AS TO HOW THE STUDENTS WILL EARN THE CREDITS AWARDED. THE CREDITS AWARDED SHOULD BE CONSISTENT WITH STUDENTS' EFFORTS REQUIRED IN A TRADITIONAL CLASSROOM SETTING: N/A

11. PROPOSED TEXT BOOK(S) AND/OR OTHER REQUIRED INSTRUCTIONAL MATERIAL(S):

Polack A. *Emergency Care and Transportation of the Sick and Injured*. 2011. Jones and Bartlett Publishers. New York. ISBN: # 978-0-7637-7828-6.

American Heart Association. *Basic Cardiac Life Support*. 2008. American Heart Association.

12. REQUIRED COURSE FOR MAJORS AND/OR AREA OF CONCENTRATION? This is an introductory requirement for the specialized Emergency Medical Services Program.

13. IF OPEN ONLY TO SELECTED STUDENTS (specify):

This course is open to those students who are interested in pursuing the comprehensive preparation of the entire program of Emergency Medical Services leading to certification as a Paramedic.

14. EXPLAIN WHAT STUDENTS WILL KNOW AND BE ABLE TO DO UPON COMPLETION OF COURSE:

Upon completion of this course, the student will be able to:

- Understand his/her role and responsibilities within an EMS system, and how these roles/responsibilities differ from other levels of providers
- Understand and value the importance of wellness in EMS and serve as a healthy role model for peers
- Integrate the implementation of injury prevention activities as an effective way to reduce death, disabilities and health care costs
- Apply fundamental knowledge of the emergency medical services system, safety/well-being of the EMT, medical/legal and ethical issues to the provision of emergency care
- Apply fundamental knowledge of the medications that the EMT may assist/administer to a patient during an emergency
- Apply scene information and patient assessment findings (scene size up, primary and secondary assessment, patient history and reassessment) to guide emergency management
- Apply knowledge of general anatomy and physiology to patient assessment and management in order to assure a patent airway, adequate mechanical ventilation and respiration for patients of all ages
- Apply a fundamental knowledge of the causes, pathophysiology, and management of shock, respiratory failure or arrest, cardiac failure or arrest and post resuscitation management.
- Apply fundamental knowledge to provide basic emergency medical care and transportation based on assessment findings for an acutely ill patient

- Apply fundamental knowledge of growth, development, and aging and assessment findings to provide basic emergency care and transportation for a patient with special needs
- Apply knowledge of operational roles and responsibilities to ensure patient, public and personnel safety
- Apply basic knowledge for an understanding of advanced provider roles and responsibilities and learn how to assist the paramedic during an emergency if needed

15. METHODS OF TEACHING --eg., LECTURES, LABORATORIES, AND OTHER ASSIGNMENTS FOR STUDENTS, INCLUDING ANY OF THE FOLLOWING: DEMONSTRATIONS, GROUP WORK, WEBSITE OR E-MAIL INTERACTIONS AND/OR ASSIGNMENTS, PRACTICE IN APPLICATION OF SKILLS:

The course is conducted utilizing powerpoint, transparencies, and practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware), assorted immobilization devices, airway adjuncts, and breathing adjuncts. Different evaluation tools such as quizzes, exam or skills evaluations are utilized to ensure competencies in all subjects.

16. ASSIGNMENTS TO STUDENTS:

Students will be required to read materials including but not limited to the course textbooks and successfully pass the quizzes, exams (both didactic and practical).

17. DESCRIBE METHOD OF EVALUATING LEARNING SPECIFIED IN #15:

Students will be evaluated on their ability to complete assignments and successful passing grade on quizzes and exams. The rubric for the course grade is:

Unit Exams:	50%
Quizzes	20%
Attendance	10%
Clinical evaluations	20%

18. TOPICAL COURSE OUTLINE (WHICH SHOULD BE AS SPECIFIC AS POSSIBLE REGARDING TOPICS COVERED, LEARNING ACTIVITIES AND ASSIGNMENTS):

<u>WEEK</u>	<u>SESSION</u>	<u>TOPIC/CONTENT</u>
1	1	Registration – Course Introduction – Introduction to Emergency Medical Care- Distribution of Materials <u>Reading Assignment</u> AAOS: Chapters 1 & 2
1	2	Well Being of the EMT <u>Reading Assignment</u>

		AAOS: Chapters 3, 4 & 5
1	3	Medical/Legal/Ethical The Human Body Baseline Vitals <u>Reading Assignment</u> Protocols: Introduction 3, SC-5, PS-92-02, PS-99-06 PS-99-09, PS-02-09 Manual: Sections 5, 13 & 14
1	4	Lab: Baseline Vitals/SAMPLE <u>Reading Assignment:</u> AAOS: Chapter 6 Protocols: PS-88-01 Manual: Section 1
2	5/6	Lifts & Carries <u>Reading Assignment</u>
2	7/8	Lab: Vitals, Lifts & Carries Module 1 Evaluation <u>Reading Assignment:</u> AAOS: Chapter 7 Manual: Sections 2 & 3
3	9	Airway <u>Reading Assignment:</u> Manual: Pages 6-17 – 6-22, Sections 9 & 14 Protocols: SC-1 Manual: Pages 6-1 – 6-16l
3	10/11	Lab: Airway, Vitals & Lifts and Carries Modular 2 Evaluation <u>Reading Assignment:</u> CPR Booklet Parts 1 & 2 Protocols: PS-99-01, PS-00-15, M-15, GA-1
3	12	CPR <u>Reading Assignment:</u> CPR Booklet: Parts 3 – 7 Protocols: PS-99-01, PS-00-15, M-15

4	13	CPR <u>Reading Assignment</u> CPR Booklet: Parts 8 – 10 AAOS: Appendix A Protocol: M-9, M-14, SA-02-02
4	14	CPR CPR Evaluation <u>Reading Assignment</u> AAOS: Chapter 8 Protocol: GA-1
4	15	Patient Assessment Scene Size-Up, Initial Assessment Communications <u>Reading Assignment</u> AAOS: Review Chapter 8
4	16	Patient Assessment Focused History & Physical Exam – Medical Focused Assessment – Trauma <u>Reading Assignment</u> AAOS: Chapters 8 & 9
5	17/18	Patient Assessment Detailed Assessment, On-going Assessment <u>Reading Assignment</u>
5	19/20	Lab: Patient Assessment <u>Reading Assignment</u> AAOS: Chapters 10 & 11
6	21	Lab: Patient Assessment Module 3 Evaluation Pharmacology, Respiratory Emergencies <u>Reading Assignment</u> AAOS – Chapter 12 Manual: Section 8 Protocols: M-12, SC-4
6	22/23	Cardiovascular Emergencies Part 1 <u>Reading Assignment</u> Protocols: M-5, M-16, M-17

6	24	Cardiovascular Emergencies Part 2 <u>Reading Assignment</u> AAOS: Chapters 13, 15, 16 & 17
7	25/26	Neurological Emergencies, AMS Allergies, Poisoning/Overdoses <u>Reading Assignment</u> AAOS: Chapters 14, 18, & 19 Protocols: M-2
7	27	Environmental Emergencies <u>Reading Assignment</u> AAOS – Chapter 20 Protocols: PS-00-01, M-1, M-3, M-4, SA-97-01
7	28	Obstetrics and Gynecological Emergencies <u>Reading Assignment:</u> Protocols: SC-3, M-6, M-8, M-11, SA-97-04
8	29	Behavioral Emergencies Lab: Medical Emergencies <u>Reading Assignment</u> Review
8	30	Lab: Medical Emergencies
8	31/32	Lab: Medical Emergencies Module 4 (Midterm Exam) Evaluation <u>Reading Assignment</u> AAOS: Chapters 21, 22 & 23 Protocols: T-2, SC-2 Manual: Pages 6-23 & 6-24
9	33	Bleeding & Shock <u>Reading Assignment</u> AAOS: Chapters 24, 25, 26, 27 & 28
9	34	Soft Tissue Injuries <u>Reading Assignment</u> AAOS – Chapters 29 & 30 Protocols: T-1, T-3, T-4, T-9

9	35/36	Musculoskeletal Injuries Injuries to Head, Neck, and Spine <u>Reading Assignment:</u> Manual: Pages 6-25 – 6-29 Protocols: T-5, T-6, T-8
10	37/38	Lab: Trauma <u>Reading Assignment:</u> Manual: Pages 6-30 – 6-35
10	39	Lab: Trauma Reading Assignment: Review
10	40	Lab Trauma <u>Module 5 Evaluation</u> <u>Reading Assignment:</u> AAOS – Chapters 31 & 32 Protocols: Appendix B Manual: Pages 6-36 & 6-37
11	41/42	Infants & Children <u>Reading Assignment:</u> AAOS: Chapters 33, 34 & 35 Protocols: M-7, M-10, M-13, T-7, Appendix A PS-01-05, PS-02-01
11	43	Lab: Infants/Children Module 6 Evaluation <u>Reading Assignment:</u> AAOS: Chapters 36, 37 & 38 Protocols: PS-00-01, PS-95-04, PS-98-05, PS-98-09, PS-03-02, PS-03-04, PS-03-05 Manual: Sections 9 & 10
11	44	Ambulance Operations – Part 1
12	45	Ambulance Operations – Part 2
12	46/7	General Review Session/ Final Written Exam
12	48	NYS Practical Skills Exam

19. SELECTED BIBLIOGRAPHY AND SOURCE MATERIALS:

American Heart Association. *Basic Cardiac Life Support*. 2008. American Heart Association.

Polack A. *Emergency Care and Transportation of the Sick and Injured*. 2011. Jones and Bartlett Publishers. New York. ISBN: # 978-0-7637-7828-6.

New York State Department of Health Bureau of Emergency Medical Services. *Emergency Medical Technician Basic Curriculum*. Student Manual.



5 credits

Course Description

The course will cover introductory material including overview of Emergency Medical Services (EMS), EMS Systems, Roles and Responsibilities of the Emergency Medical Technician (EMT) and Paramedic, and Anatomy & Physiology, Pathophysiology and Airway Management, clinical pre-hospital pharmacology, shock and resuscitation, medical and trauma assessments, special populations, EMS operations and a special section on how to assist paramedics in the field. Lab work involves bleeding control, CPR, patient assessment, splinting and patient movement techniques. Skills are subsequently demonstrated and practiced in the laboratory, hospital and/or the field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

Pre-requisite or Co-requisite

Eng 12 and Bio 11.

Course objectives (Note: These course objectives were directly taken from the New York State Department of Health Bureau of Emergency Medical Services, National Standard Curriculum, EMT-Basic)¹

Upon completion of this course, the student will be able to:

- Understand his/her role and responsibilities within an EMS system, and how these roles/responsibilities differ from other levels of providers
- Understand and value the importance of wellness in EMS and serve as a healthy role model for peers
- Integrate the implementation of injury prevention activities as an effective way to reduce death, disabilities and health care costs
- Apply fundamental knowledge of the emergency medical services system, safety/well-being of the EMT, medical/legal and ethical issues to the provision of emergency care
- Apply fundamental knowledge of the medications that the EMT may assist/ administer to a patient during an emergency
- Apply scene information and patient assessment findings (scene size up, primary and secondary assessment, patient history and reassessment) to guide emergency management

¹New York State Department of Health, Bureau of Emergency Medical Services, National Standard Curriculum, EMT-Paramedic. <http://www.health.state.ny.us/nysdoh/ems/paramedic.htm>. Accessed September 16, 2010.

- Apply knowledge of general anatomy and physiology to patient assessment and management in order to assure a patent airway, adequate mechanical ventilation and respiration for patients of all ages
- Apply a fundamental knowledge of the causes, pathophysiology, and management of shock, respiratory failure or arrest, cardiac failure or arrest and post resuscitation management.
- Apply fundamental knowledge to provide basic emergency medical care and transportation based on assessment findings for an acutely ill patient
- Apply fundamental knowledge of growth, development, and aging and assessment findings to provide basic emergency care and transportation for a patient with special needs
- Apply knowledge of operational roles and responsibilities to ensure patient, public and personnel safety
- Apply basic knowledge for an understanding of advanced provider roles and responsibilities and learn how to assist the paramedic during an emergency if needed

Teaching strategies

The course is conducted utilizing powerpoint, transparencies, and practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware), assorted immobilization devices, airway adjuncts, and breathing adjuncts. Different evaluation tools such as quizzes, exam or skills evaluations are utilized to ensure competencies in all subjects.

Course Requirements:

1. Textbooks

Required:

Emergency Care and Transportation of the Sick and Injured. 10th edition. Pollak A. Jones and Bartlett Publishers. New York. 2011. ISBN # 978-0-7637-7828-6

2. Attendance:

A student is deemed excessively absent when he or she has been absent 15% of the number of contact hours a class meets during a semester. When a student is excessively absent, a grade of “W” or “WU” will be assigned as described in the college catalog.

3. Evaluation:

Grades will be calculated according to college and departmental policy as follows:

A+	97-100
A	93-96
A-	90-92
B+	87-89
B	83-86
B-	80-82
C+	78-79
C	75-77
C-	70-74
D+	66-69
D	60-65
F	<60and below
W	Withdrew without penalty
WU	Unofficial Withdrawal (Counts as failure)
INC	Term's Work Incomplete. Counts as "F" grade unless work is completed within six months.

Grading policy:

Unit Exams:	50%
Quizzes	20%
Attendance	10%
Clinical evaluations	20%

The Department of Nursing adheres to the Policies and Procedures on Academic Integrity as set forth by CUNY. See the Emergency Medical Services Student Handbook, the KCC Catalog and website for further details. Students are expected to take all tests when scheduled. Exceptions to this rule will be for emergency situations and the faculty must know in advance. Students who do not take a test on the scheduled date are required to take a makeup test. All makeup tests will be given at the end of the semester. Students who fail to take the scheduled exams or makeup will receive a grade of zero for that test.

All written assignments must comply with college standards for written work. Written assignments are to be turned in during the class period on the date that they are due. All assignments must be handed in by the end of the course to complete the requirements of the course. A late assignment will meet the requirements of the course but will not receive full credit. If written assignments are not submitted by the end of the course, the student will receive a grade of "F" for the course. A conference with the instructor is required at mid-semester and at the end of the course to discuss the student's progress. Students may initiate conferences at other times.

4. Classroom Decorum:

All pagers, wireless phones, electronic games, radios, tape or CD players or other devices that generate sound must be turned off when any member of the academic community enters a classroom. Cellular devices are allowed to be on in the classroom only if the owner is using the caller ID, voice messages or a vibrating battery or universal clip mechanism. **NO TEXTING IS ALLOWED AT ANY TIME DURING CLASS AND/OR LABS.** Members of the academic community must exit the classroom to make or receive calls.

5. Retention Criteria:

Criteria for retention in the Program mandates that students must:

- a. receive no more than two grades under "C" in any pre or co-requisites
- b. earn a minimum final grade of "C" in every Emergency Medical Services course.
- c. the student must repeat an Emergency Medical Services course once if the grade is below "C"
- d. a second grade below "C" will result in the student's dismissal from the program.
- e. Students who fail a course achieving a grade of not less than "C-" may apply to repeat the course one time only. Repeating the course is subject to space availability.
- f. Students must submit an "**Intent to Return to Emergency Medical Services Form**" outlining what they thought caused them to be unsuccessful and include a plan for success that demonstrates significant changes in how they will approach the course when repeated.

6. Dress Requirements:

Students must present themselves as professional role models. Students are required to wear KCC EMS uniforms during class and clinical/field rotations.

- Z. Fatigue can certainly impair a health care worker's ability to provide safe, professional care. Thus KCC's Nursing Department states: All students need to carefully assess his/her level of fatigue, school requirements in terms of lecture, on-campus labs and clinical experiences and own work schedules. This assessment should carefully consider the potential impact of excessive employment on his/her ability to provide safe, professional care. Each student has an ethical responsibility to ensure that fatigue does not negatively impact student responsibilities.

Class Schedule & location

Unless otherwise stated, classes will meet from 6PM to 10PM on Mondays through Thursdays. Class will meet in room M411. On occasion throughout the semester, optional classes will be held on Saturday and/or Sunday (from 9AM to 5PM).

<u>WEEK</u>	<u>SESSION</u>	<u>TOPIC/CONTENT</u>
1	1	Registration – Course Introduction – Introduction to Emergency Medical Care- Distribution of Materials
		<u>Reading Assignment</u> AAOS: Chapters 1 & 2
1	2	Well Being of the EMT <u>Reading Assignment</u> AAOS: Chapters 3, 4 & 5
1	3	Medical/Legal/Ethical The Human Body Baseline Vitals
		<u>Reading Assignment</u> Protocols: Introduction 3, SC-5, PS-92-02, PS-99-06 PS-99-09, PS-02-09 Manual: Sections 5, 13 & 14
1	4	Lab: Baseline Vitals/SAMPLE
		<u>Reading Assignment:</u> AAOS: Chapter 6 Protocols: PS-88-01 Manual: Section 1
2	5/6	Lifts & Carries
		<u>Reading Assignment</u>
2	7/8	Lab: Vitals, Lifts & Carries

3	9	Module 1 Evaluation <u>Reading Assignment:</u> AAOS: Chapter 7 Manual: Sections 2 & 3 Airway
3	10/11	<u>Reading Assignment:</u> Manual: Pages 6-17 – 6-22, Sections 9 & 14 Protocols: SC-1 Manual: Pages 6-1 – 6-16l Lab: Airway, Vitals & Lifts and Carries Modular 2 Evaluation
3	12	<u>Reading Assignment:</u> CPR Booklet Parts 1 & 2 Protocols: PS-99-01, PS-00-15, M-15, GA-1 CPR
4	13	<u>Reading Assignment:</u> CPR Booklet: Parts 3 – 7 Protocols: PS-99-01, PS-00-15, M-15 CPR
4	14	<u>Reading Assignment</u> CPR Booklet: Parts 8 – 10 AAOS: Appendix A Protocol: M-9, M-14, SA-02-02 CPR CPR Evaluation

4	15	<u>Reading Assignment</u> AAOS: Chapter 8 Protocol: GA-1
4	16	<u>Reading Assignment</u> AAOS: Review Chapter 8
4	16	Patient Assessment Scene Size-Up, Initial Assessment Communications
5	17/18	Patient Assessment Detailed Assessment, On-going Assessment <u>Reading Assignment</u> AAOS: Chapters 8 & 9
5	19/20	Lab: Patient Assessment
6	21	<u>Reading Assignment</u> AAOS: Chapters 10 & 11
6	21	Lab: Patient Assessment Module 3 Evaluation Pharmacology, Respiratory Emergencies
		<u>Reading Assignment</u> AAOS – Chapter 12 Manual: Section 8 Protocols: M-12, SC-4

6	22/23	Cardiovascular Emergencies Part 1 <u>Reading Assignment</u> Protocols: M-5, M-16, M-17
6	24	Cardiovascular Emergencies Part 2 <u>Reading Assignment</u> AAOS: Chapters 13, 15, 16 & 17
7	25/26	Neurological Emergencies, AMS Allergies, Poisoning/Overdoses <u>Reading Assignment</u> AAOS: Chapters 14, 18, & 19 Protocols: M-2
7	27	Environmental Emergencies <u>Reading Assignment</u> AAOS – Chapter 20 Protocols: PS-00-01, M-1, M-3, M-4, SA-97-01
7	28	Obstetrics and Gynecological Emergencies <u>Reading Assignment:</u> Protocols: SC-3, M-6, M-8, M-11, SA-97-04
8	29	Behavioral Emergencies Lab: Medical Emergencies <u>Reading Assignment</u> Review

8	30	Lab: Medical Emergencies
8	31/32	Lab: Medical Emergencies Module 4 (Midterm Exam) Evaluation
9	33	<u>Reading Assignment</u> AAOS: Chapters 21, 22 & 23 Protocols: T-2, SC-2 Manual: Pages 6-23 & 6-24
9	34	Bleeding & Shock
9	35/36	<u>Reading Assignment</u> AAOS: Chapters 24, 25, 26, 27 & 28
9	37/38	Soft Tissue Injuries
9	37/38	<u>Reading Assignment</u> AAOS – Chapters 29 & 30 Protocols: T-1, T-3, T-4, T-9
9	37/38	Musculoskeletal Injuries Injuries to Head, Neck, and Spine
9	37/38	<u>Reading Assignment:</u> Manual: Pages 6-25 – 6-29 Protocols: T-5, T-6, T-8
10	37/38	Lab: Trauma
10	37/38	<u>Reading Assignment:</u> Manual: Pages 6-30 – 6-35

10	39	Lab: Trauma Reading Assignment: Review
10	40	Lab Trauma Module 5 Evaluation Reading Assignment: AAOS – Chapters 31 & 32 Protocols: Appendix B Manual: Pages 6-36 & 6-37
11	41/42	Infants & Children Reading Assignment: AAOS: Chapters 33, 34 & 35 Protocols: M-7, M-10, M-13, T-7, Appendix A PS-01-05, PS-02-01
11	43	Lab: Infants/Children Module 6 Evaluation Reading Assignment: AAOS: Chapters 36, 37 & 38 Protocols: PS-00-01, PS-95-04, PS-98-05, PS-98-09, PS-03-02, PS-03-04, PS-03-05 Manual: Sections 9 & 10
11	44	Ambulance Operations – Part 1
12	45	Ambulance Operations – Part 2
12	46/7	General Review Session/ Final Written Exam

12 48 NYS Practical Skills Exam

Instructors:

Professor of Anatomy & Physiology, M.S., Physician Assistant,
Senior Instructor with the certification level of EMT-P, C.I.C
Lab Instructors with the certification level of EMT or EMT-P

**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK**

1. **DEPARTMENT, COURSE NUMBER AND TITLE:**
Nursing, EMS 10100, Emergency Medical Technician Clinical
2. **DOES THIS COURSE MEET DISTRIBUTION REQUIREMENTS FOR GROUPS I-V? IF SO, WHICH GROUP? N/A**
3. **TRANSFERABILITY OF THIS COURSE. DESCRIBE HOW THIS COURSE TRANSFERS: N/A**
4. **BULLETIN DESCRIPTION OF COURSE:**
This course is designed to introduce the student to individualized experience in the field of emergency medical services in specific areas of preparatory, airway, patient assessment, trauma, medical, special considerations, and operations from the perspective of an EMT. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.
5. **NUMBER OF WEEKLY CLASS HOURS (please indicate the number of hours per week spent in a lab, hours spent on site doing fieldwork, hours of supervision and hours in classroom-- if applicable):**
8 clinical hours per week
6. **NUMBER OF CREDITS: 1**
7. **COURSE PREREQUISITES AND COREQUISITES**
A. **PREREQUISITES:** EMS 10000
B. **COREQUISITES:** NONE
8. **BRIEF RATIONALE TO JUSTIFY PROPOSED COURSE TO INCLUDE:**
There is a need for more certified prehospital care providers. It is necessary to appropriately prepare students with knowledge and skills for them to succeed. This course will provide the student the opportunity to practice those skills in a clinical hospital setting and a field ambulance environment.

9. LIST OF COURSES, IF ANY, TO BE WITHDRAWN WHEN COURSE(S) IS (ARE) ADOPTED: N/A

10. IF COURSE IS AN INTERNSHIP OR INDEPENDENT STUDY OR THE LIKE, PROVIDE AN EXPLANATION AS TO HOW THE STUDENTS WILL EARN THE CREDITS AWARDED. THE CREDITS AWARDED SHOULD BE CONSISTENT WITH STUDENTS' EFFORTS REQUIRED IN A TRADITIONAL CLASSROOM SETTING: N/A

11. PROPOSED TEXT BOOK(S) AND/OR OTHER REQUIRED INSTRUCTIONAL MATERIAL(S):
Polack A. *Emergency Care and Transportation of the Sick and Injured*. 2011. Jones and Bartlett Publishers. New York. ISBN: # 978-0-7637-7828-6.

American Heart Association. *Basic Cardiac Life Support*. 2008. American Heart Association.

12. REQUIRED COURSE FOR MAJORS AND/OR AREA OF CONCENTRATION? This is a requirement course for the specialized Emergency Medical Services Program.

13. IF OPEN ONLY TO SELECTED STUDENTS (specify):

This course is open to those students who are interested in pursuing the comprehensive preparation of the entire program of Emergency Medical Services leading to certification as a Paramedic.

14. EXPLAIN WHAT STUDENTS WILL KNOW AND BE ABLE TO DO UPON COMPLETION OF COURSE:

Upon completion of this course, the student will be able to:

- Understand the key differences between providers at the Basic and Advanced Life Support level.
- Demonstrate safe methods for lifting and moving patients in emergency and non-emergency situations using various techniques and apparatus.
- Demonstrate the proper procedures to take for personal protection from disease.
- Demonstrate the use of protective equipment appropriate to the environment and scene.
- Use universal precautions and body substance isolation procedures during patient care.
- Observe BLS procedures and gain familiarity with said procedures such as but not limited to airway management techniques, CPR, splinting and bleeding control
- Demonstrate the techniques for scene size up, assessing mental status, assessing the airway, assessing if the patient is breathing, assessing if the patient has a pulse, assessing if the patient has external bleeding
- Demonstrate the ability to triage
- Perform a rapid medical and trauma assessment, a focused history and physical exam of the medical and trauma patient, a detailed physical examination, demonstrate the skills involved in performing the ongoing assessment

15. METHODS OF TEACHING --eg., LECTURES, LABORATORIES, AND OTHER ASSIGNMENTS FOR STUDENTS, INCLUDING ANY OF THE FOLLOWING: DEMONSTRATIONS, GROUP WORK, WEBSITE OR E-MAIL INTERACTIONS AND/OR ASSIGNMENTS, PRACTICE IN APPLICATION OF SKILLS:

The course is conducted utilizing practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware). Skills and clinical evaluations (at hospital and ambulance sites) are utilized to ensure competencies in all subjects

16. ASSIGNMENTS TO STUDENTS:

Students will be required to read materials including but not limited to the course textbooks and successfully pass the quizzes, exams (both didactic and practical). Furthermore, students will be required to complete checklists of all skills performed.

17. DESCRIBE METHOD OF EVALUATING LEARNING SPECIFIED IN #15:

Students will be evaluated on their ability to complete assignments and successful passing grade on evaluations of skills. The rubric for the course grade is:

Clinical and field evaluations	40%
Patient logs (completed)	40%
Attendance	20%

18. TOPICAL COURSE OUTLINE (WHICH SHOULD BE AS SPECIFIC AS POSSIBLE REGARDING TOPICS COVERED, LEARNING ACTIVITIES AND ASSIGNMENTS):

Week	Topic	Assignment
1	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
2	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
3	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
4	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
5	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
6	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication	Various clinical and field rotation sites

19. SELECTED BIBLIOGRAPHY AND SOURCE MATERIALS:

American Heart Association. *Basic Cardiac Life Support*. 2008. American Heart Association.

Polack A. *Emergency Care and Transportation of the Sick and Injured*. 2011. Jones and Bartlett Publishers. New York. ISBN: # 978-0-7637-7828-6.

New York State Department of Health Bureau of Emergency Medical Services. *Emergency Medical Technician Basic Curriculum*. Student Manual.



**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK**

1. **DEPARTMENT, COURSE NUMBER AND TITLE:**
Nursing, EMS 21000, Paramedic I
2. **DOES THIS COURSE MEET DISTRIBUTION REQUIREMENTS FOR GROUPS I-V? IF SO, WHICH GROUP? N/A**
3. **TRANSFERABILITY OF THIS COURSE. DESCRIBE HOW THIS COURSE TRANSFERS: N/A**
4. **BULLETIN DESCRIPTION OF COURSE:**
The course will cover material including Introduction to Advanced Prehospital Care, EMS Systems, Roles and Responsibilities of the Paramedic and Medical/Legal Aspects of Advanced Prehospital Care, and Anatomy & Physiology, Pathophysiology and Advanced Airway Management. Clinical pre-hospital pharmacology, IV access and advanced airway management techniques are introduced. Lab work involves IV access techniques, endotracheal intubation, computing dosages, preparing medications for administration and practice in all administrative techniques. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course. In addition, students will practice BLS skills including Patient Assessment, Bleeding and Fracture Management.
5. **NUMBER OF WEEKLY CLASS HOURS** (please indicate the number of hours per week spent in a lab, hours spent on site doing fieldwork, hours of supervision and hours in classroom-- if applicable):
12 lab hours, 4 lec hours
6. **NUMBER OF CREDITS: 7**
7. **COURSE PREREQUISITES AND COREQUISITES**
 - A. **PREREQUISITES:** EMS 100, EMS 101
 - B. **COREQUISITES:** EMS 211
 - C. **PRE OR COREQ:** NONE
8. **BRIEF RATIONALE TO JUSTIFY PROPOSED COURSE TO INCLUDE:**
There is a need for more certified prehospital care providers. It is necessary to appropriately prepare students with knowledge and skills for them to succeed. This course will provide the student a basic understanding of advanced emergency medical care at the paramedic level of prehospital care.
9. **LIST OF COURSES, IF ANY, TO BE WITHDRAWN WHEN COURSE(S) IS (ARE) ADOPTED: N/A**

- 10. IF COURSE IS AN INTERNSHIP OR INDEPENDENT STUDY OR THE LIKE, PROVIDE AN EXPLANATION AS TO HOW THE STUDENTS WILL EARN THE CREDITS AWARDED. THE CREDITS AWARDED SHOULD BE CONSISTENT WITH STUDENTS' EFFORTS REQUIRED IN A TRADITIONAL CLASSROOM SETTING: N/A**

PROPOSED TEXT BOOK(S) AND/OR OTHER REQUIRED INSTRUCTIONAL MATERIAL(S):

American Heart Association. Advanced Cardiac Life Support. 2008. American Heart Association.

Caroline N. 2008. Emergency Care in the Streets. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

- 12. REQUIRED COURSE FOR MAJORS AND/OR AREA OF CONCENTRATION? This is a requirement course for the specialized Emergency Medical Services Program.**

13. IF OPEN ONLY TO SELECTED STUDENTS (specify):

This course is open to those students who are interested in pursuing the comprehensive preparation of the entire program of Emergency Medical Services leading to certification as a Paramedic.

14. EXPLAIN WHAT STUDENTS WILL KNOW AND BE ABLE TO DO UPON COMPLETION OF COURSE:

Upon completion of this course, the student will be able to:

- Understand his/her role and responsibilities within an EMS system, and how these roles/responsibilities differ from other levels of providers
- Understand and value the importance of wellness in EMS and serve as a healthy role model for peers
- Integrate the implementation of injury prevention activities as an effective way to reduce death, disabilities and health care costs
- Understand the legal issues that impact decisions made in the out of hospital environment
- Apply the general concepts of pathophysiology for the assessment and management of emergency patients
- Integrate pathophysiological principles of pharmacology and the assessment findings to formulate a field impression and implement pharmacological management plan
- Safely and precisely access the venous circulation and administer medications
- Integrate the principles of therapeutic communication to effectively communicate with any patient while providing care
- Integrate the physiological, psychological, and sociological changes throughout human development with assessment and communication strategies for patients of all ages
- Establish and/or maintain a patent airway, oxygenate and ventilate a patient
- Use the appropriate techniques to obtain a medical history from a patient

- Explain the pathophysiological significance of physical exam findings
- Integrate the principles of history taking and techniques of physical exam to perform a physical exam to perform a patient assessment
- Apply a process of clinical decision making to use the assessment findings to help form a field impression
- Follow an accepted format for dissemination of patient information in verbal form, either in person or over the radio
- Effectively document the essential elements of patient assessment, care and transport

15. METHODS OF TEACHING --eg., LECTURES, LABORATORIES, AND OTHER ASSIGNMENTS FOR STUDENTS, INCLUDING ANY OF THE FOLLOWING: DEMONSTRATIONS, GROUP WORK, WEBSITE OR E-MAIL INTERACTIONS AND/OR ASSIGNMENTS, PRACTICE IN APPLICATION OF SKILLS:

The course is conducted utilizing powerpoint, transparencies, and practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware), assorted immobilization devices, airway adjuncts, and breathing adjuncts. Different evaluation tools such as quizzes, exam or skills evaluations are utilized to ensure competencies in all subjects.

16. ASSIGNMENTS TO STUDENTS:

Students will be required to read materials including but not limited to the course textbooks and successfully pass the quizzes, exams (both didactic and practical).

17. DESCRIBE METHOD OF EVALUATING LEARNING SPECIFIED IN #15:

Students will be evaluated on their ability to complete assignments and successful passing grade on quizzes and exams. The rubric for the course grade is:

Unit Exams:	50%
Quizzes	20%
Attendance	10%
Clinical evaluations	20%

18. TOPICAL COURSE OUTLINE (WHICH SHOULD BE AS SPECIFIC AS POSSIBLE REGARDING TOPICS COVERED, LEARNING ACTIVITIES AND ASSIGNMENTS):

WEEK	SESSION	READING	TOPIC	LECTURE/LAB
1	1	Caroline 1.4-2.27	Preparatory	Lecture: EMS Systems, Roles, and Responsibilities EMS Research The Well-Being of the Paramedic
1	2	Caroline 3.2-5.13	Preparatory	Lecture: Illness and Injury

				Prevention Medical, Legal and Ethics
1	3	Caroline 16.4-16.27	Preparatory	Lecture: Communications Documentation
1	4	Caroline 16.4-16.27	Preparatory	Exam: Preparatory
2	5	Caroline 26.4-39.30	Anatomy & Physiology	Lecture: Anatomic Definitions Organization of the Human Body's Cells
2	6	Caroline 26.4-39.30	Anatomy & Physiology	Lecture: The Skeletal System The Muscular System The Circulatory System
2	7	Caroline 26.4-39.30	Anatomy & Physiology	Lecture: Lymphatic and Immune System The Respiratory System The Nervous System
2	8	Caroline 26.4-39.30	Anatomy & Physiology	Lecture: Gastrointestinal System Urinary System, Metabolism & Body Fluids Balance The Reproductive System & Human Genetics
3	9	Caroline 26.4-39.30	Anatomy & Physiology	Lecture: Endocrine System Integumentary System Special Sensory Systems
3	10	Caroline 26.4-39.30	Anatomy & Physiology	Exam: Anatomy & Physiology
3	11	Caroline 12.4-15.17	Clinical Orientation	Lab: Clinical Orientation
3	12		Medical Terminology	Lecture: Medical Terminology
4	13	Caroline 6.2-6.51	Pathophysiology	Lecture: Part One <ul style="list-style-type: none"> • Introduction • Review of the Basic Cellular

				System <ul style="list-style-type: none"> • Adaptations in Cells and Tissues • The Cellular Environment
4	14	Caroline 6.2-6.51	Pathophysiology	Lecture: Part Two: <ul style="list-style-type: none"> • Acid Base Balance • Cell Injury • Genetics and Familial Disease • Hypoperfusion
4	15	Caroline 6.2-6.51	Pathophysiology	Lecture: Part Three: <ul style="list-style-type: none"> • The Body's Self Defense Mechanisms • Acute and Chronic Inflammation • Variances in Immunity and Inflammation • Stress and Disease
4	16	Caroline 6.2-6.51	Pathophysiology	Exam: Pathophysiology
5	17	Caroline 9.2-9.17	Life Span Development Public Health	Lecture: Life Span Development Public Health
5	18	Caroline 9.2-9.17	Life Span Development Public Health	Exam: Life Span Development Public Health
5	19	Caroline 7.2-7.39	Pharmacology	Lecture: Pharmacology Part One
5	20	Caroline 7.2-7.39	Pharmacology	Lecture: Pharmacology Part Two
6	21	Caroline 7.2-7.39	Pharmacology	Lab: Medications used in Paramedicine
6	22	Caroline 7.2-7.39	Pharmacology	Lecture: Medication Administration Part One
	23	Caroline	Pharmacology	Lecture:

6		7.2-7.39		Medication Administration Part Two
6	24	Caroline 7.2-7.39	Pharmacology	Lecture: Medication Administration Part Three
7	25	Caroline 7.2-7.39	Pharmacology	Lab: Medication Administration Skill Practice
7	26	Caroline 7.2-7.39	Pharmacology	Lab: Medication Administration Skill Practice
7	27	Caroline 7.2-7.39	Pharmacology	Lab: Medication Administration Skill Practice
7	28	Caroline 7.2-7.39	Pharmacology	Lab: Medication Administration Skill Practice
8	29	Caroline 7.2-7.39	Pharmacology	Lab: Medication Administration Skill Practice
8	30	Caroline 7.2-7.39	Pharmacology	Lab: Skill Evaluation – IM, SQ, IN
8	31	Caroline 7.2-7.39	Pharmacology	Lab: Skill Evaluation – IV, IV Bolus including med math
8	32	Caroline 7.2-7.39	Pharmacology	Lab: Skill Evaluation – IV Drip including med math
9	33	Caroline 7.2-7.39	Pharmacology	Lab: Skill Evaluation – Paramedic Medication Knowledge
9	34	Caroline 7.2-7.39	Pharmacology	Exam: Pharmacology
9	35	Caroline 11.5-11.115	Airway	Lecture: Airway Part One
	36	Caroline	Airway	Lecture:

9		11.5-11.115		Airway Part Two
10	37	Caroline 11.5-11.115	Airway	Lecture: Airway Part Three
10	38	Caroline 11.5-11.115	Airway	Lab: Airway Skills Practice
10	39	Caroline 11.5-11.115	Airway	Lab: Airway Skills Practice
10	40	Caroline 11.5-11.115	Airway	Lab: Airway Skills Practice
11	41	Caroline 11.5-11.115	Airway	Lab: Skill Evaluation – BLS Airway Management w/O2
11	42	Caroline 11.5-11.115	Airway	Lab: Skill Evaluation – ET & Dual Lumen
11	43	Caroline 11.5-11.115	Airway	Lab: Skill Evaluation – Needle Cric
11	44	Caroline 11.5-11.115	Airway	Exam : Airway
12	45	Caroline 12.4-16.23	Patient Assessment	Lecture: Medical Assessment
12	46	Caroline 12.4-16.23	Patient Assessment	Lab: Medical Assessment Skill Practice
12	47	Caroline 12.4-16.23	Patient Assessment	Lecture: Trauma Assessment
12	48	Caroline 12.4-16.23	Patient Assessment	Lab: Trauma Assessment Skill Practice

19. SELECTED BIBLIOGRAPHY AND SOURCE MATERIALS:

American Heart Association. *Advanced Cardiac Life Support*. 2008. American Heart Association.

Caroline N. 2008. *Emergency Care in the Streets*. 6th ed. Jones and Bartlett

Publishers. Sudbury, MA.

Elling B, Elling K. 2009. Pharmacology- Paramedic. Jones and Bartlett Publishers. Sudbury, MA.

Elling B, Elling K, and Rotheberg M. 2004. Anatomy and Physiology- Paramedic. Jones and Bartlett Publishers. Sudbury, MA.

Garcia T and Miller G. 2004. Arrhythmia Recognition-The Art of Interpretation. Jones and Bartlett Publishers. Sudbury, MA.

Margolis G. 2004. Airway Management- Paramedic. Jones and Bartlett Publishers. Sudbury, MA.

Salmon M and Pollak A. 2009. *Calculations for Medication Administration*. Jones and Bartlett Publishers. Sudbury, MA.

New York State Department of Health Bureau of Emergency Medical Services. *Emergency Medical Technician-Paramedic Curriculum*. Student Manual.

**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK**

1. DEPARTMENT, COURSE NUMBER AND TITLE:

Nursing, EMS 21100, Paramedic Clinical I

2. DOES THIS COURSE MEET DISTRIBUTION REQUIREMENTS FOR GROUPS I-V? IF SO, WHICH GROUP? N/A

3. TRANSFERABILITY OF THIS COURSE. DESCRIBE HOW THIS COURSE TRANSFERS: N/A

4. BULLETIN DESCRIPTION OF COURSE:

This course is designed to introduce the student to individualized experience in the field of emergency medical services in specific areas of preparatory, airway and become familiar with hospital departments and ambulance operations. This course is the first of a four-course clinical sequence. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

5. NUMBER OF WEEKLY CLASS HOURS (please indicate the number of hours per week spent in a lab, hours spent on site doing fieldwork, hours of supervision and hours in classroom-- if applicable):
24 clinical hours per week for 6 week module

6. NUMBER OF CREDITS: 2

7. COURSE PREREQUISITES AND COREQUISITES

A. PREREQUISITES:	EMS 100, EMS 101
B. COREQUISITES:	EMS 210
C. PRE OR COREQ:	NONE

8. BRIEF RATIONALE TO JUSTIFY PROPOSED COURSE TO INCLUDE:

There is a need for more certified prehospital care providers. It is necessary to appropriately prepare students with knowledge and skills for them to succeed. This course will provide the student the opportunity to practice the theory in a clinical hospital or field ambulance setting.

9. LIST OF COURSES, IF ANY, TO BE WITHDRAWN WHEN COURSE(S) IS (ARE) ADOPTED: N/A

10. IF COURSE IS AN INTERNSHIP OR INDEPENDENT STUDY OR THE LIKE, PROVIDE AN EXPLANATION AS TO HOW THE STUDENTS WILL EARN THE CREDITS AWARDED. THE CREDITS AWARDED SHOULD BE CONSISTENT WITH STUDENTS' EFFORTS REQUIRED IN A TRADITIONAL CLASSROOM SETTING: N/A

PROPOSED TEXT BOOK(S) AND/OR OTHER REQUIRED INSTRUCTIONAL MATERIAL(S):

American Heart Association. Advanced Cardiac Life Support. 2008. American Heart Association.

Caroline N. 2008. Emergency Care in the Streets. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

12. **REQUIRED COURSE FOR MAJORS AND/OR AREA OF CONCENTRATION?** This is a requirement course for the specialized Emergency Medical Services Program.

13. **IF OPEN ONLY TO SELECTED STUDENTS (specify):**

This course is open to those students who are interested in pursuing the comprehensive preparation of the entire program of Emergency Medical Services leading to certification as a Paramedic.

14. **EXPLAIN WHAT STUDENTS WILL KNOW AND BE ABLE TO DO UPON COMPLETION OF COURSE:**

Upon completion of this course, the student will be able to:

- Understand the key differences between providers at the Basic and Advanced Life Support level.
- Demonstrate safe methods for lifting and moving patients in emergency and non-emergency situations using various techniques and apparatus.
- Demonstrate the proper procedures to take for personal protection from disease.
- Demonstrate the use of protective equipment appropriate to the environment and scene.
- Use universal precautions and body substance isolation procedures during medication administration.
- Observe ALS procedures and gain familiarity with said procedures such as but not limited to advanced airway management techniques and intravenous and intraosseous access, and medication administration
- Demonstrate the techniques for scene size up, assessing mental status, assessing the airway, assessing if the patient is breathing, assessing if the patient has a pulse, assessing if the patient has external bleeding
- Demonstrate the ability to triage

- Perform a rapid medical and trauma assessment, a focused history and physical exam of the medical and trauma patient, a detailed physical examination, demonstrate the skills involved in performing the ongoing assessment
- Demonstrate the ability to use the local dispatch communication system, the ability to use a radio, the ability to use biotelemetry equipment used locally

15. METHODS OF TEACHING --eg., LECTURES, LABORATORIES, AND OTHER ASSIGNMENTS FOR STUDENTS, INCLUDING ANY OF THE FOLLOWING: DEMONSTRATIONS, GROUP WORK, WEBSITE OR E-MAIL INTERACTIONS AND/OR ASSIGNMENTS, PRACTICE IN APPLICATION OF SKILLS:

The course is conducted utilizing practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware). Skills and clinical evaluations (at hospital and ambulance sites) are utilized to ensure competencies in all subjects.

16. ASSIGNMENTS TO STUDENTS:

Students will be required to read materials including but not limited to the course textbooks and successfully pass the quizzes, exams (both didactic and practical).

17. DESCRIBE METHOD OF EVALUATING LEARNING SPECIFIED IN #15:

Students will be evaluated on their ability to complete assignments and successful passing grade on quizzes and exams. The rubric for the course grade is:

Clinical and field evaluations	40%
Patient logs (completed)	40%
Attendance	20%

18. TOPICAL COURSE OUTLINE (WHICH SHOULD BE AS SPECIFIC AS POSSIBLE REGARDING TOPICS COVERED, LEARNING ACTIVITIES AND ASSIGNMENTS):

1	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
2	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
3	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
4	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient,	Various clinical and field rotation sites

	pharmacology, airway management, and medication administration	
5	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
6	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
7	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
8	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
9	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
10	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
11	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
12	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites

19. SELECTED BIBLIOGRAPHY AND SOURCE MATERIALS:

American Heart Association. *Advanced Cardiac Life Support*. 2008. American Heart Association.

Caroline N. 2008. *Emergency Care in the Streets*. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

Elling B, Elling K. 2009. *Pharmacology- Paramedic*. Jones and Bartlett

Publishers. Sudbury, MA.

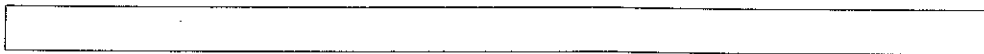
Elling B, Elling K, and Rotheberg M. 2004. *Anatomy and Physiology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Garcia T and Miller G. 2004. *Arrhythmia Recognition-The Art of Interpretation*. Jones and Bartlett Publishers. Sudbury, MA.

Margolis G. 2004. *Airway Management- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Salmon M and Pollak A.2009. *Calculations for Medication Administration*. Jones and Bartlett Publishers. Sudbury, MA.

New York State Department of Health Bureau of Emergency Medical Services. *Emergency Medical Technician-Paramedic Curriculum*. Student Manual.



**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK**

1. **DEPARTMENT, COURSE NUMBER AND TITLE:**
Nursing, EMS 22000, Paramedic II
2. **DOES THIS COURSE MEET DISTRIBUTION REQUIREMENTS FOR GROUPS I-V? IF SO, WHICH GROUP? N/A**
3. **TRANSFERABILITY OF THIS COURSE. DESCRIBE HOW THIS COURSE TRANSFERS: N/A**
4. **BULLETIN DESCRIPTION OF COURSE:**
The course will cover material including Patient Assessment, Pharmacology, Airway and Medical Emergencies. Patient assessment and formulation of a field impression, selecting and implementing an appropriate treatment plan for the patient will be emphasized. Skills related to the practice of advanced pre-hospital care are demonstrated, learned and practiced in the laboratory/hospital/field. Students must satisfactorily perform all practical skills in order to successfully complete the course.
5. **NUMBER OF WEEKLY CLASS HOURS (please indicate the number of hours per week spent in a lab, hours spent on site doing fieldwork, hours of supervision and hours in classroom-- if applicable):**
8 lab hours, 3 lec hours
6. **NUMBER OF CREDITS: 5**
7. **COURSE PREREQUISITES AND COREQUISITES**
 - A. **PREREQUISITES:** EMS 210, EMS 211
 - B. **COREQUISITES:** EMS 221
 - C. **PRE OR COREQ:** NONE
8. **BRIEF RATIONALE TO JUSTIFY PROPOSED COURSE TO INCLUDE:**
There is a need for more certified prehospital care providers. It is necessary to appropriately prepare students with knowledge and skills for them to succeed. This course will provide the student a continued understanding of advanced emergency medical care at the paramedic level of prehospital care.
9. **LIST OF COURSES, IF ANY, TO BE WITHDRAWN WHEN COURSE(S) IS (ARE) ADOPTED: N/A**
10. **IF COURSE IS AN INTERNSHIP OR INDEPENDENT STUDY OR THE LIKE, PROVIDE AN EXPLANATION AS TO HOW THE STUDENTS WILL EARN THE CREDITS AWARDED. THE CREDITS AWARDED SHOULD BE CONSISTENT WITH STUDENTS' EFFORTS REQUIRED IN A TRADITIONAL CLASSROOM SETTING: N/A**

PROPOSED TEXT BOOK(S) AND/OR OTHER REQUIRED INSTRUCTIONAL MATERIAL(S):

American Heart Association. Advanced Cardiac Life Support. 2008. American Heart Association.

Caroline N. 2008. Emergency Care in the Streets. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

12. REQUIRED COURSE FOR MAJORS AND/OR AREA OF CONCENTRATION? This is a requirement course for the specialized Emergency Medical Services Program.

13. IF OPEN ONLY TO SELECTED STUDENTS (specify):

This course is open to those students who are interested in pursuing the comprehensive preparation of the entire program of Emergency Medical Services leading to certification as a Paramedic.

14. EXPLAIN WHAT STUDENTS WILL KNOW AND BE ABLE TO DO UPON COMPLETION OF COURSE:

Upon completion of this course, the student will be able to:

- Integrate pathophysiological principles of pharmacology and the assessment findings to formulate a field impression and implement pharmacological management plan
- Integrate the principles of therapeutic communication to effectively communicate with any patient while providing care
- Establish and/or maintain a patent airway, oxygenate and ventilate a patient
- Use the appropriate techniques to obtain a medical history from a patient
- Explain the pathophysiological significance of physical exam findings
- Integrate the principles of history taking and techniques of physical exam to perform a physical exam to perform a patient assessment
- Apply a process of clinical decision making to use the assessment findings to help form a field impression
- Follow an accepted format for dissemination of patient information in verbal form, either in person or over the radio
- Effectively document the essential elements of patient assessment, care and transport
- Integrate pathophysiological principle and assessment findings to formulate a field impression and implement a treatment plan for the patient with respiratory, cardiovascular, neurological, endocrine, anaphylactic or allergic, gastroenterologic, renal or urologic, toxic exposure, hematopoietic, an environmental induced or exacerbated medical or trauma condition, infectious or communicable, behavioral, gynecological
- Apply an understanding of the anatomy and physiology of the female reproductive system to the assessment and management of a patient experiencing normal or abnormal labor

15. METHODS OF TEACHING --eg., LECTURES, LABORATORIES, AND OTHER ASSIGNMENTS

FOR STUDENTS, INCLUDING ANY OF THE FOLLOWING: DEMONSTRATIONS, GROUP WORK, WEBSITE OR E-MAIL INTERACTIONS AND/OR ASSIGNMENTS, PRACTICE IN APPLICATION OF SKILLS:

The course is conducted utilizing powerpoint, transparencies, and practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware), assorted immobilization devices, airway adjuncts, and breathing adjuncts. Different evaluation tools such as quizzes, exam or skills evaluations are utilized to ensure competencies in all subjects.

16. ASSIGNMENTS TO STUDENTS:

Students will be required to read materials including but not limited to the course textbooks and successfully pass the quizzes, exams (both didactic and practical).

17. DESCRIBE METHOD OF EVALUATING LEARNING SPECIFIED IN #15:

Students will be evaluated on their ability to complete assignments and successful passing grade on quizzes and exams. The rubric for the course grade is:

Unit Exams:	50%
Quizzes	10%
Attendance	10%
Clinical evaluations	30%

18. TOPICAL COURSE OUTLINE (WHICH SHOULD BE AS SPECIFIC AS POSSIBLE REGARDING TOPICS COVERED, LEARNING ACTIVITIES AND ASSIGNMENTS):

WEEK	SESSION	READING	TOPIC	LECTURE/LAB
1	49	Caroline 12.4-16.23	Patient Assessment	Lab: Patient Assessment Scenario Skill Practice
1	50	Caroline 12.4-16.23	Patient Assessment	Lab: Vital Signs Diagnostic Equipment Review
1	51	Caroline 7.2-7.39	Pharmacology	Lecture/Lab : Pharmacology Review
1	52	Caroline 11.5- 11.115	Airway	Lecture/Lab: Airway Review
2	53		Study Session	Library: Group Study
2	54		EXAM	Exam: Fall Semester Final Written Exam
2	55	Caroline 26.3-39.34	Medical Emergencies	Lecture: Respiratory Emergencies

2	56	Caroline 26.3-39.34	Medical Emergencies	Lab: Respiratory Emergencies <ul style="list-style-type: none"> • Nebulizer • Pulse Oximetry • Capnography • CPAP • Needle Cricothyrotomy • Peak Flow • Respiratory Medications
3	57	Caroline 26.3-39.34	Medical Emergencies	Lecture: Cardiovascular Emergencies
3	58	Caroline 26.3-39.34	Medical Emergencies	Lecture: Cardiovascular Emergencies
3	59	Caroline 26.3-39.34	Medical Emergencies	Lecture: Cardiovascular Emergencies
3	60	Caroline 26.3-39.34	Medical Emergencies	Lecture: Cardiovascular Emergencies
4	61	Caroline 26.3-39.34	Medical Emergencies	Lecture: Cardiovascular Emergencies – AHA ACLS
4	62	Caroline 26.3-39.34	Medical Emergencies	Lab: Cardiovascular Emergencies
4	63	Caroline 26.3-39.34	Medical Emergencies	Lab: Cardiovascular Emergencies
4	64	Caroline 26.3-39.34	Medical Emergencies	Lab: Cardiovascular Emergencies
5	65	Caroline 26.3-39.34	Medical Emergencies	Lab: Cardiovascular Emergencies
5	66	Caroline 26.3-39.34	Medical Emergencies	Lab: Cardiovascular Emergencies
	67	Caroline	Medical	Lab:

5		26.3-39.34	Emergencies	Cardiovascular Emergencies
5	68	Caroline 26.3-39.34	Medical Emergencies	Lecture: Neurological Emergencies
6	69	Caroline 26.3-39.34	Medical Emergencies	Lecture: Endocrine Emergencies
6	70	Caroline 26.3-39.34	Medical Emergencies	Lecture: Allergic Reactions
6	71	Caroline 26.3-39.34	Medical Emergencies	Lab: Scenario Learning – Medical Emergencies
6	72	Caroline 26.3-39.34	Medical Emergencies	Lecture: Gastrointestinal Emergencies

19. SELECTED BIBLIOGRAPHY AND SOURCE MATERIALS:

American Heart Association. *Advanced Cardiac Life Support*. 2008. American Heart Association.

Caroline N. 2008. *Emergency Care in the Streets*. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

Elling B, Elling K. 2009. *Pharmacology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Elling B, Elling K, and Rotheberg M. 2004. *Anatomy and Physiology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Garcia T and Miller G. 2004. *Arrhythmia Recognition-The Art of Interpretation*. Jones and Bartlett Publishers. Sudbury, MA.

Margolis G. 2004. *Airway Management- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Salmon M and Pollak A. 2009. *Calculations for Medication Administration*. Jones and Bartlett Publishers. Sudbury, MA.

New York State Department of Health Bureau of Emergency Medical Services. *Emergency Medical Technician-Paramedic Curriculum*. Student Manual.

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**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK**

1. **DEPARTMENT, COURSE NUMBER AND TITLE:**
Nursing, EMS 2210, Paramedic Clinical II
2. **DOES THIS COURSE MEET DISTRIBUTION REQUIREMENTS FOR GROUPS I-V? IF SO, WHICH GROUP? N/A**
3. **TRANSFERABILITY OF THIS COURSE. DESCRIBE HOW THIS COURSE TRANSFERS: N/A**
4. **BULLETIN DESCRIPTION OF COURSE:**
This course is designed to allow the student to continue the individualized experience in the field of emergency medical services in specific areas of preparatory, airway. This course is the second of a four-course clinical sequence. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.
5. **NUMBER OF WEEKLY CLASS HOURS** (please indicate the number of hours per week spent in a lab, hours spent on site doing fieldwork, hours of supervision and hours in classroom-- if applicable):
12 clinical hours for 12 week semester; 24 clinical hours per week for 6-week module
6. **NUMBER OF CREDITS: 3**
7. **COURSE PREREQUISITES AND COREQUISITES**
 - A. **PREREQUISITES:** EMS 210, 211
 - B. **COREQUISITES:** EMS 220
 - C. **PRE OR COREQ:** NONE
8. **BRIEF RATIONALE TO JUSTIFY PROPOSED COURSE TO INCLUDE:**
There is a need for more certified prehospital care providers. It is necessary to appropriately prepare students with knowledge and skills for them to succeed. This course will provide the student the opportunity to practice the theory in a clinical hospital or field ambulance setting.

9. LIST OF COURSES, IF ANY, TO BE WITHDRAWN WHEN COURSE(S) IS (ARE) ADOPTED: N/A
10. IF COURSE IS AN INTERNSHIP OR INDEPENDENT STUDY OR THE LIKE, PROVIDE AN EXPLANATION AS TO HOW THE STUDENTS WILL EARN THE CREDITS AWARDED. THE CREDITS AWARDED SHOULD BE CONSISTENT WITH STUDENTS' EFFORTS REQUIRED IN A TRADITIONAL CLASSROOM SETTING: N/A

PROPOSED TEXT BOOK(S) AND/OR OTHER REQUIRED INSTRUCTIONAL MATERIAL(S):

American Heart Association. Advanced Cardiac Life Support. 2008. American Heart Association.

Caroline N. 2008. Emergency Care in the Streets. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

12. REQUIRED COURSE FOR MAJORS AND/OR AREA OF CONCENTRATION? This is a requirement course for the specialized Emergency Medical Services Program.

13. IF OPEN ONLY TO SELECTED STUDENTS (specify):

This course is open to those students who are interested in pursuing the comprehensive preparation of the entire program of Emergency Medical Services leading to certification as a Paramedic.

14. EXPLAIN WHAT STUDENTS WILL KNOW AND BE ABLE TO DO UPON COMPLETION OF COURSE:

Upon completion of this course, the student will be able to:

- Demonstrate safe methods for lifting and moving patients in emergency and non-emergency situations using various techniques and apparatus.
- Demonstrate the proper procedures to take for personal protection from disease.
- Demonstrate the use of protective equipment appropriate to the environment and scene.
- Use universal precautions and body substance isolation procedures during medication administration.
- Observe ALS procedures and gain familiarity with said procedures such as but not limited to advanced airway management techniques and intravenous and intraosseous access, and medication administration
- Demonstrate the techniques for scene size up, assessing mental status, assessing the airway, assessing if the patient is breathing, assessing if the patient has a pulse, assessing if the patient has external bleeding
- Demonstrate the ability to triage
- Perform a rapid medical and trauma assessment, a focused history and physical exam of the medical and trauma patient, a detailed physical examination, demonstrate the skills involved in performing the ongoing assessment

- Demonstrate the ability to use the local communication system, the ability to use a radio, the ability to use biotelemetry equipment used locally

15. METHODS OF TEACHING –eg., LECTURES, LABORATORIES, AND OTHER ASSIGNMENTS FOR STUDENTS, INCLUDING ANY OF THE FOLLOWING: DEMONSTRATIONS, GROUP WORK, WEBSITE OR E-MAIL INTERACTIONS AND/OR ASSIGNMENTS, PRACTICE IN APPLICATION OF SKILLS:

The course is conducted utilizing practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware). Skills and clinical evaluations (at hospital and ambulance sites) are utilized to ensure competencies in all subjects.

16. ASSIGNMENTS TO STUDENTS:

Students will be required to read materials including but not limited to the course textbooks and successfully pass the quizzes, exams (both didactic and practical).

17. DESCRIBE METHOD OF EVALUATING LEARNING SPECIFIED IN #15:

Students will be evaluated on their ability to complete assignments and successful passing grade on quizzes and exams. The rubric for the course grade is:

Clinical and field evaluations	40%
Patient logs (completed)	40%
Attendance	20%

18. TOPICAL COURSE OUTLINE (WHICH SHOULD BE AS SPECIFIC AS POSSIBLE REGARDING TOPICS COVERED, LEARNING ACTIVITIES AND ASSIGNMENTS):

Week	Topic	Assignment
1	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
2	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
3	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
4	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
	Preparatory, anatomy & physiology, medical terminology,	Various clinical and

5	patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	field rotation sites
6	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites

19. SELECTED BIBLIOGRAPHY AND SOURCE MATERIALS:

American Heart Association. *Advanced Cardiac Life Support*. 2008. American Heart Association.

Caroline N. 2008. *Emergency Care in the Streets*. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

Elling B, Elling K. 2009. *Pharmacology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

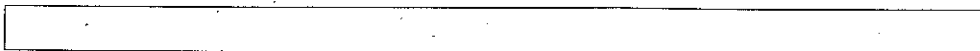
Elling B, Elling K, and Rotheberg M. 2004. *Anatomy and Physiology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Garcia T and Miller G. 2004. *Arrhythmia Recognition-The Art of Interpretation*. Jones and Bartlett Publishers. Sudbury, MA.

Margolis G. 2004. *Airway Management- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Salmon M and Pollak A. 2009. *Calculations for Medication Administration*. Jones and Bartlett Publishers. Sudbury, MA.

New York State Department of Health Bureau of Emergency Medical Services. *Emergency Medical Technician-Paramedic Curriculum*. Student Manual.



**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK**

1. **DEPARTMENT, COURSE NUMBER AND TITLE:**
Nursing, EMS 23000, Paramedic III
2. **DOES THIS COURSE MEET DISTRIBUTION REQUIREMENTS FOR GROUPS I-V? IF SO, WHICH GROUP? N/A**
3. **TRANSFERABILITY OF THIS COURSE. DESCRIBE HOW THIS COURSE TRANSFERS: N/A**
4. **BULLETIN DESCRIPTION OF COURSE:**
The course will cover material including Medical Emergencies, Trauma and Environmental Emergencies, Special Populations, Evaluations, EMS Operations, and NYC Protocols. Patient assessment and formulation of a field impression, selecting and implementing an appropriate treatment plan for the patient will be continued. Assessment and formulation of field impressions and implementation of an appropriate treatment plan for patients with a wide range of medical complaints including respiratory, cardiovascular, neurological, environmental and obstetrical emergencies. Special skills associated with patient rescue, extrication and movement that are common in the community are covered. These include MVA extrication, water rescue, patient transport and safety from high-rise, subways, and limited space environments.
5. **NUMBER OF WEEKLY CLASS HOURS (please indicate the number of hours per week spent in a lab, hours spent on site doing fieldwork, hours of supervision and hours in classroom-- if applicable):**
12 lab hours, 4 lec hours
6. **NUMBER OF CREDITS: 7**
7. **COURSE PREREQUISITES AND COREQUISITES**
 - A. **PREREQUISITES:** EMS 220, EMS 221
 - B. **COREQUISITES:** EMS 231
 - C. **PRE OR COREQ:** NONE
8. **BRIEF RATIONALE TO JUSTIFY PROPOSED COURSE TO INCLUDE:**
There is a need for more certified prehospital care providers. It is necessary to appropriately prepare students with knowledge and skills for them to succeed. This course will provide the student an understanding of advanced emergency medical care at the paramedic level of prehospital care.
9. **LIST OF COURSES, IF ANY, TO BE WITHDRAWN WHEN COURSE(S) IS (ARE) ADOPTED: N/A**

10. IF COURSE IS AN INTERNSHIP OR INDEPENDENT STUDY OR THE LIKE, PROVIDE AN EXPLANATION AS TO HOW THE STUDENTS WILL EARN THE CREDITS AWARDED. THE CREDITS AWARDED SHOULD BE CONSISTENT WITH STUDENTS' EFFORTS REQUIRED IN A TRADITIONAL CLASSROOM SETTING: N/A

PROPOSED TEXT BOOK(S) AND/OR OTHER REQUIRED INSTRUCTIONAL MATERIAL(S):

American Heart Association. Advanced Cardiac Life Support. 2008. American Heart Association.

Caroline N. 2008. Emergency Care in the Streets. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

12. **REQUIRED COURSE FOR MAJORS AND/OR AREA OF CONCENTRATION?** This is a requirement course for the specialized Emergency Medical Services Program.

13. **IF OPEN ONLY TO SELECTED STUDENTS (specify):**

This course is open to those students who are interested in pursuing the comprehensive preparation of the entire program of Emergency Medical Services leading to certification as a Paramedic.

14. **EXPLAIN WHAT STUDENTS WILL KNOW AND BE ABLE TO DO UPON COMPLETION OF COURSE:**

Upon completion of this course, the student will be able to:

- Integrate pathophysiological principle and assessment findings to formulate a field impression and implement a treatment plan for the patient with respiratory, cardiovascular, neurological, endocrine, anaphylactic or allergic, gastroenterologic, renal or urologic, toxic exposure, hematopoietic, an environmental induced or exacerbated medical or trauma condition, infectious or communicable, behavioral, gynecological
- Apply an understanding of the anatomy and physiology of the female reproductive system to the assessment and management of a patient experiencing normal or abnormal labor
- Integrate the kinematics to enhance the patient assessment and predict the likelihood of injuries based on the patient's mechanism of injury
- Integrate pathophysiological principle and assessment findings to formulate a field impression and implement a treatment plan for the patient with shock or hemorrhage, soft tissue trauma, burn injury, suspected head/spinal/thoracic/abdominal/musculoskeletal injury,
- Integrate pathophysiological principle and assessment findings to formulate a field impression and implement a treatment plan for: the neonate/ pediatric/ geriatric patient, or has sustained abuse or assault, diverse patient and those who face physical, mental, social and financial challenges, the acute deterioration of a chronic care patient

- Integrate the principles of assessment based management to perform the appropriate assessment and implement the management plan for patients with common complaints
- Understand standards and guidelines that help ensure safe and effective ground and air medical transport
- Integrate the principles of general incident management multiple casualty incident (MCI) management techniques in order to function effectively at major incidents
- Integrate the principles of rescue operations and awareness to safely rescue a patient from the water, hazard atmospheres, trenches, highways, and hazardous terrain
- Evaluate hazardous materials incidents , call for appropriate resources, and work in the cold zone
- Have an awareness of the human hazard of crime and violence and the safe operation at crime scenes and other emergencies

15. METHODS OF TEACHING --eg., LECTURES, LABORATORIES, AND OTHER ASSIGNMENTS FOR STUDENTS, INCLUDING ANY OF THE FOLLOWING: DEMONSTRATIONS, GROUP WORK, WEBSITE OR E-MAIL INTERACTIONS AND/OR ASSIGNMENTS, PRACTICE IN APPLICATION OF SKILLS:

The course is conducted utilizing powerpoint, transparencies, and practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware), assorted immobilization devices, airway adjuncts, and breathing adjuncts. Different evaluation tools such as quizzes, exam or skills evaluations are utilized to ensure competencies in all subjects.

16. ASSIGNMENTS TO STUDENTS:

Students will be required to read materials including but not limited to the course textbooks and successfully pass the quizzes, exams (both didactic and practical).

17. DESCRIBE METHOD OF EVALUATING LEARNING SPECIFIED IN #15:

Students will be evaluated on their ability to complete assignments and successful passing grade on quizzes and exams. The rubric for the course grade is:

Unit Exams:	50%
Quizzes	10%
Attendance	10%
Clinical evaluations	30%

18. TOPICAL COURSE OUTLINE (WHICH SHOULD BE AS SPECIFIC AS POSSIBLE REGARDING TOPICS COVERED, LEARNING ACTIVITIES AND ASSIGNMENTS):

WEEK	SESSION	READING	TOPIC	LECTURE/LAB
1	73	Caroline 26.3-39.34	Medical Emergencies	Lecture: Renal and Urologic Emergencies
	74	Caroline	Medical	Lecture:

1		26.3-39.34	Emergencies	Toxicology – Substance Abuse & Poisoning
1	75	Caroline 26.3-39.34	Medical Emergencies	Lecture: Behavioral Emergencies
1	76	Caroline 26.3-39.34	Medical Emergencies	Lecture: Hematologic Emergencies Infectious and Communicable Diseases
2	77	Caroline 26.3-39.34	Medical Emergencies	Lab: Scenario Learning – Medical Emergencies
2	78	Caroline 26.3-39.34	Medical Emergencies	Lab: Skill Evaluation - Cardiac Emergencies
2	79	Caroline 26.3-39.34	Medical Emergencies	Lab: Skill Evaluation - Respiratory Emergencies
2	80	Caroline 26.3-39.34	Medical Emergencies	Lab: Skill Evaluation - Medical Emergencies
3	81	Caroline 26.3-39.34	Medical Emergencies	Exam: Medical Emergencies – Part One
3	82	Caroline 26.3-39.34	Medical Emergencies	Exam: Medical Emergencies – Part Two
3	83	Caroline 17.3-25.39	Trauma	Lecture: Kinematics of Trauma Bleeding and Shock
3	84	Caroline 17.3-25.39	Trauma	Lecture: Orthopedic Trauma Soft Tissue Trauma
4	85	Caroline 17.3-25.39	Trauma	Lab: Trauma Skills Practice
4	86	Caroline 17.3-25.39	Trauma	Lecture: Chest Trauma Abdominal and Genitourinary Trauma
4	87	Caroline 17.3-25.39	Trauma	Lecture: Head, Facial, Neck, and Spine Trauma Nervous System Trauma
4	88	Caroline 17.3-25.39	Trauma	Lab: Trauma Skill Practice
	89	Caroline	Trauma	Lab:

5		17.3-25.39		Trauma Skill Practice
OPTIONAL				PHTLS
OPTIONAL				PHTLS
5	90	Caroline 17.3-25.39	Trauma/ Environment al	Lecture: Environmental Emergencies
5	91	Caroline 17.3-25.39	Trauma	Exam: Trauma Emergencies
5	92	Caroline 40.3-45.30	Special Patient Populations	Lecture: Gynecological Emergencies
6	93	Caroline 40.3-45.30	Special Patient Populations	Lecture: Obstetrics
6	94	Caroline 40.3-45.30	Special Patient Populations	Lab: Obstetrics
6	95	Caroline 40.3-45.30	Special Patient Populations	Lecture: Neonatal Care
6	96	Caroline 40.3-45.30	Special Patient Populations	Lecture: AHA Pediatric Advanced Life Support – Part One
7	97	Caroline 40.3-45.30	Special Patient Populations	Lecture: AHA Pediatric Advanced Life Support – Part Two
7	98	Caroline 40.3-45.30	Special Patient Populations	Lecture: Pediatrics
7	99	Caroline 40.3-45.30	Special Patient Populations	Lab: AHA Pediatric Advanced Life Support – Part Three
7	100	Caroline 40.3-45.30	Special Patient Populations	Lab: AHA Pediatric Advanced Life Support – Part Four
8	101	Caroline 40.3-45.30	Special Patient Populations	Lab: Pediatric Emergencies
8	102	Caroline 40.3-45.30	Special Patient Populations	Lab: Pediatric Emergencies
8	103	Caroline 40.3-45.30	Special Patient Populations	Lecture: Geriatrics
	104	Caroline	Special	Lecture:

8		40.3-45.30	Patient Populations	Abuse, Neglect and Assault Patient's with Special Needs
9	105	Caroline 40.3-45.30	Special Patient Populations	Lecture: Acute Interventions for the Chronic Care Patient
9	106	Caroline 40.3-45.30	Special Patient Populations	Lab: Scenario Evaluations
9	107	Caroline 40.3-45.30	Special Patient Populations	Lab: Scenario Evaluations
OPTIONAL				NAEMT EPC
OPTIONAL				NAEMT EPC
9	108	Caroline 40.3-45.30	Special Patient Populations	Exam: Special Patient Populations
10	109	Caroline 26.3-39.34	Medical Emergencies	Lecture/Lab: Review Medical Emergencies
10	110	Caroline 17.3-25.39	Trauma	Lecture/Lab: Review Trauma Emergencies
10	111	Caroline 40.3-45.30	Special Patient Populations	Lecture/Lab: Review Pediatric Emergencies
10	112	Caroline 40.3-45.30	Special Patient Populations	Lecture/Lab: Review Geriatric Emergencies
11	113		Evaluation	Lab: Spring Semester MegaCodes
11	114		Evaluation	Lab: Spring Semester MegaCodes
11	115	Caroline 46.3-51.17	EMS Operations	Lecture: Lifting and Moving Patients Using the Ambulance Stretcher
11	116		Protocol	Lecture: NYC REMSCO Protocol Review
12	117		Protocol	Lecture: NYC REMSCO Protocol

				Review
12	118		Protocol	Lecture: NYC REMSCO Protocol Review
12	119		Protocol	Lecture: NYC REMSCO Protocol Review
12	120		EXAM	Exam: Spring Semester Final Exam

19. SELECTED BIBLIOGRAPHY AND SOURCE MATERIALS:

American Heart Association. *Advanced Cardiac Life Support*. 2008. American Heart Association.

Caroline N. 2008. *Emergency Care in the Streets*. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

Elling B, Elling K. 2009. *Pharmacology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

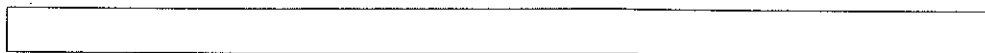
Elling B, Elling K, and Rotheberg M. 2004. *Anatomy and Physiology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Garcia T and Miller G. 2004. *Arrhythmia Recognition-The Art of Interpretation*. Jones and Bartlett Publishers. Sudbury, MA.

Margolis G. 2004. *Airway Management- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Salmon M and Pollak A. 2009. *Calculations for Medication Administration*. Jones and Bartlett Publishers. Sudbury, MA.

New York State Department of Health Bureau of Emergency Medical Services. *Emergency Medical Technician-Paramedic Curriculum*. Student Manual.



**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK**

1. **DEPARTMENT, COURSE NUMBER AND TITLE:**
Nursing, EMS 23100, Paramedic Clinical III
2. **DOES THIS COURSE MEET DISTRIBUTION REQUIREMENTS FOR GROUPS I-V? IF SO, WHICH GROUP? N/A**
3. **TRANSFERABILITY OF THIS COURSE. DESCRIBE HOW THIS COURSE TRANSFERS: N/A**
4. **BULLETIN DESCRIPTION OF COURSE:**
This course is designed to allow the student to continue individualized experiences in the field of emergency medical services in specific areas of preparatory, airway, patient assessment, trauma, and medical. This course is the third of a four-course clinical sequence. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.
5. **NUMBER OF WEEKLY CLASS HOURS** (please indicate the number of hours per week spent in a lab, hours spent on site doing fieldwork, hours of supervision and hours in classroom-- if applicable):
12 clinical hours per week for 12 week semester
6. **NUMBER OF CREDITS: 2**
7. **COURSE PREREQUISITES AND COREQUISITES**
 - A. **PREREQUISITES:** EMS 220, EMS 221
 - B. **COREQUISITES:** EMS 230
 - C. **PRE OR COREQ:** NONE
8. **BRIEF RATIONALE TO JUSTIFY PROPOSED COURSE TO INCLUDE:**
There is a need for more certified prehospital care providers. It is necessary to appropriately prepare students with knowledge and skills for them to succeed. This course will provide the student the opportunity to practice the theory in a clinical hospital or field ambulance setting.

9. LIST OF COURSES, IF ANY, TO BE WITHDRAWN WHEN COURSE(S) IS (ARE) ADOPTED: N/A

10. IF COURSE IS AN INTERNSHIP OR INDEPENDENT STUDY OR THE LIKE, PROVIDE AN EXPLANATION AS TO HOW THE STUDENTS WILL EARN THE CREDITS AWARDED. THE CREDITS AWARDED SHOULD BE CONSISTENT WITH STUDENTS' EFFORTS REQUIRED IN A TRADITIONAL CLASSROOM SETTING: N/A

PROPOSED TEXT BOOK(S) AND/OR OTHER REQUIRED INSTRUCTIONAL MATERIAL(S):

American Heart Association. Advanced Cardiac Life Support. 2008. American Heart Association.

Caroline N. 2008. Emergency Care in the Streets. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

12. REQUIRED COURSE FOR MAJORS AND/OR AREA OF CONCENTRATION? This is a requirement course for the specialized Emergency Medical Services Program.

13. IF OPEN ONLY TO SELECTED STUDENTS (specify):

This course is open to those students who are interested in pursuing the comprehensive preparation of the entire program of Emergency Medical Services leading to certification as a Paramedic.

14. EXPLAIN WHAT STUDENTS WILL KNOW AND BE ABLE TO DO UPON COMPLETION OF COURSE:

Upon completion of this course, the student will be able to:

- Demonstrate safe methods for lifting and moving patients in emergency and non-emergency situations using various techniques and apparatus.
- Demonstrate the proper procedures to take for personal protection from disease.
- Demonstrate the use of protective equipment appropriate to the environment and scene.
- Use universal precautions and body substance isolation procedures during medication administration.
- Observe ALS procedures and gain familiarity with said procedures such as but not limited to advanced airway management techniques and intravenous and intraosseous access, and medication administration
- Demonstrate the techniques for scene size up, assessing mental status, assessing the airway, assessing if the patient is breathing, assessing if the patient has a pulse, assessing if the patient has external bleeding
- Demonstrate the ability to triage
- Perform a rapid medical and trauma assessment, a focused history and physical exam of the medical and trauma patient, a detailed physical examination, demonstrate the skills involved in performing the ongoing assessment

- Demonstrate the ability to use the local dispatch communication system, the ability to use a radio, the ability to use the biotelemetry equipment used locally
- Demonstrate the ability to undertake a leadership role in the emergency care setting

15. METHODS OF TEACHING --eg., LECTURES, LABORATORIES, AND OTHER ASSIGNMENTS FOR STUDENTS, INCLUDING ANY OF THE FOLLOWING: DEMONSTRATIONS, GROUP WORK, WEBSITE OR E-MAIL INTERACTIONS AND/OR ASSIGNMENTS, PRACTICE IN APPLICATION OF SKILLS:

The course is conducted utilizing practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware). Skills and clinical evaluations (at hospital and ambulance sites) are utilized to ensure competencies in all subjects.

16. ASSIGNMENTS TO STUDENTS:

Students will be required to read materials including but not limited to the course textbooks and successfully pass the quizzes, exams (both didactic and practical).

17. DESCRIBE METHOD OF EVALUATING LEARNING SPECIFIED IN #15:

Students will be evaluated on their ability to complete assignments and successful passing grade on quizzes and exams. The rubric for the course grade is:

Clinical and field evaluations	40%
Patient logs (completed)	40%
Attendance	20%

18. TOPICAL COURSE OUTLINE (WHICH SHOULD BE AS SPECIFIC AS POSSIBLE REGARDING TOPICS COVERED, LEARNING ACTIVITIES AND ASSIGNMENTS):

1	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
2	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
3	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
4	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites

5	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
6	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
7	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
8	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
9	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
10	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
11	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
12	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites

19. SELECTED BIBLIOGRAPHY AND SOURCE MATERIALS:

American Heart Association. *Advanced Cardiac Life Support*. 2008. American Heart Association.

Caroline N. 2008. *Emergency Care in the Streets*. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

Elling B, Elling K. 2009. *Pharmacology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Elling B, Elling K, and Rotheberg M. 2004. *Anatomy and Physiology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Garcia T and Miller G. 2004. *Arrhythmia Recognition-The Art of Interpretation*. Jones and Bartlett Publishers. Sudbury, MA.

Margolis G. 2004. *Airway Management- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Salmon M and Pollak A.2009. *Calculations for Medication Administration*. Jones and Bartlett Publishers. Sudbury, MA.

New York State Department of Health Bureau of Emergency Medical Services. *Emergency Medical Technician-Paramedic Curriculum*. Student Manual.



**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK**

- 1. DEPARTMENT, COURSE NUMBER AND TITLE:**
Nursing, EMS 24000, Paramedic IV
- 2. DOES THIS COURSE MEET DISTRIBUTION REQUIREMENTS FOR GROUPS I-V? IF SO, WHICH GROUP? N/A**
- 3. TRANSFERABILITY OF THIS COURSE. DESCRIBE HOW THIS COURSE TRANSFERS: N/A**
- 4. BULLETIN DESCRIPTION OF COURSE:**
The course will cover material including Medical Emergencies, Trauma and Environmental Emergencies, Special Populations, Evaluations, EMS Operations, and NYC Protocols. Patient assessment and formulation of a field impression, and selecting and implementing an appropriate treatment plan for neonatal, pediatric and geriatric patients, patients with diverse needs and chronically ill patients. The student will also learn how to safely manage the scene of an emergency. Students will complete nationally recognized Certification instruction for American Heart Association (AHA) Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS) and Neonatal Advanced Life Support (NALS), and Pre-Hospital Trauma Life Support (PHTLS), AAOS Advanced Assessment of Trauma (ATT) and FEMA Weapons of Mass Destruction (WMD) during this course. Students will spend significant amount of time practicing both oral and practical skills. Summative program written examinations are also part of this course.
- 5. NUMBER OF WEEKLY CLASS HOURS** (please indicate the number of hours per week spent in a lab, hours spent on site doing fieldwork, hours of supervision and hours in classroom-- if applicable):
8 lab hours, 3 lec hours
- 6. NUMBER OF CREDITS: 5**
- 7. COURSE PREREQUISITES AND COREQUISITES**
 - A. PREREQUISITES:** EMS 230, EMS 231
 - B. COREQUISITES:** EMS 241
 - C. PRE OR COREQ:** NONE
- 8. BRIEF RATIONALE TO JUSTIFY PROPOSED COURSE TO INCLUDE:**
There is a need for more certified prehospital care providers. It is necessary to appropriately prepare students with knowledge and skills for them to succeed. This course will provide the student a continued understanding of advanced emergency medical care at the paramedic level of prehospital care.

9. LIST OF COURSES, IF ANY, TO BE WITHDRAWN WHEN COURSE(S) IS (ARE) ADOPTED: N/A

10. IF COURSE IS AN INTERNSHIP OR INDEPENDENT STUDY OR THE LIKE, PROVIDE AN EXPLANATION AS TO HOW THE STUDENTS WILL EARN THE CREDITS AWARDED. THE CREDITS AWARDED SHOULD BE CONSISTENT WITH STUDENTS' EFFORTS REQUIRED IN A TRADITIONAL CLASSROOM SETTING: N/A

PROPOSED TEXT BOOK(S) AND/OR OTHER REQUIRED INSTRUCTIONAL MATERIAL(S):

American Heart Association. Advanced Cardiac Life Support. 2008. American Heart Association.

Caroline N. 2008. Emergency Care in the Streets. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

12. **REQUIRED COURSE FOR MAJORS AND/OR AREA OF CONCENTRATION?** This is a requirement course for the specialized Emergency Medical Services Program.

13. **IF OPEN ONLY TO SELECTED STUDENTS (specify):**

This course is open to those students who are interested in pursuing the comprehensive preparation of the entire program of Emergency Medical Services leading to certification as a Paramedic.

14. **EXPLAIN WHAT STUDENTS WILL KNOW AND BE ABLE TO DO UPON COMPLETION OF COURSE:**

Upon completion of this course, the student will be able to:

- Understand his/her role and responsibilities within an EMS system, and how these roles/responsibilities differ from other levels of providers
- Understand and value the importance of wellness in EMS and serve as a healthy role model for peers
- Integrate the implementation of injury prevention activities as an effective way to reduce death, disabilities and health care costs
- Understand the legal issues that impact decisions made in the out of hospital environment
- Apply the general concepts of pathophysiology for the assessment and management of emergency patients
- Integrate pathophysiological principles of pharmacology and the assessment findings to formulate a field impression and implement pharmacological management plan
- Safely and precisely access the venous circulation and administer medications
- Integrate the principles of therapeutic communication to effectively communicate with any patient while providing care
- Integrate the physiological, psychological, and sociological changes throughout human development with assessment and communication strategies for patients of all ages
- Establish and/or maintain a patent airway, oxygenate and ventilate a patient

- Use the appropriate techniques to obtain a medical history from a patient
- Explain the pathophysiological significance of physical exam findings
- Integrate the principles of history taking and techniques of physical exam to perform a physical exam to perform a patient assessment
- Apply a process of clinical decision making to use the assessment findings to help form a field impression
- Follow an accepted format for dissemination of patient information in verbal form, either in person or over the radio
- Effectively document the essential elements of patient assessment, care and transport

15. METHODS OF TEACHING --eg., LECTURES, LABORATORIES, AND OTHER ASSIGNMENTS FOR STUDENTS, INCLUDING ANY OF THE FOLLOWING: DEMONSTRATIONS, GROUP WORK, WEBSITE OR E-MAIL INTERACTIONS AND/OR ASSIGNMENTS, PRACTICE IN APPLICATION OF SKILLS:

The course is conducted utilizing powerpoint, transparencies, and practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware), assorted immobilization devices, airway adjuncts, and breathing adjuncts. Different evaluation tools such as quizzes, exam or skills evaluations are utilized to ensure competencies in all subjects.

16. ASSIGNMENTS TO STUDENTS:

Students will be required to read materials including but not limited to the course textbooks and successfully pass the quizzes, exams (both didactic and practical).

17. DESCRIBE METHOD OF EVALUATING LEARNING SPECIFIED IN #15:

Students will be evaluated on their ability to complete assignments and successful passing grade on quizzes and exams. The rubric for the course grade is:

Unit Exams:	50%
Quizzes	10%
Attendance	10%
Clinical evaluations	30%

18. TOPICAL COURSE OUTLINE (WHICH SHOULD BE AS SPECIFIC AS POSSIBLE REGARDING TOPICS COVERED, LEARNING ACTIVITIES AND ASSIGNMENTS):

WEEK	SESSION	READING	TOPIC	LECTURE/LAB
1	121	Caroline 46.3-51.17	EMS Operations	Lecture: Ambulance Operations – Ground & Air
1	122	Caroline 46.3-51.17	EMS Operations	Lab: Lifting and Moving Skill Practice
1	123	Caroline 46.3-51.17	EMS Operations	Lecture: Incident Management/Incident

				Command
1	124	Caroline 46.3-51.17	EMS Operations	Lecture: Multiple Casualty Incidents/Triage
2	125	Caroline 46.3-51.17	EMS Operations	Lab: Using the Incident Command System Triage Skill Practice
2	126	Caroline 46.3-51.17	EMS Operations	Lecture: Terrorism and Disasters
2	127	Caroline 46.3-51.17	EMS Operations	Lecture: Hazardous Materials
2	128	Caroline 46.3-51.17	EMS Operations	Lab: MCI Table Top Exercise
3	129	Caroline 46.3-51.17	EMS Operations	Exam: EMS Operations
3	130	Caroline 7.2-7.33	Pharmacology / Airway	Lab: Pharmacology Skill Practice/ Airway Skill Practice
3	131	Caroline 12.3-14.33	Patient Assessment	Lab: Assessment Skill Practice
3	132	Caroline 26.3-39.34	Medical Emergencies	Lab: Medical Emergencies Skill Practice
4	133	Caroline 17.3-25.39	Trauma	Lab: Trauma Skill Practice
4	134		Review	Lab: MegaCodes
4	135		Review	Lecture/Lab: 12 Lead ECG
4	136		Review	Lab: NREMT Skill Practice
5	137		Review	Lab: Oral Scenario Practice
5	138		Final Exam	Protocol Exam (NYC REMSCO)
5	139		Final Exam	ECG Exam (Static, Dynamic, Written)
5	140		Final Exam	Adult Oral

6	141		Final Exam	Pediatric Oral
6	142		Final Exam	MegaCode
6	143		Final Exam	Course Final Exam – Part One
6	144		Final Exam	Course Final Exam – Part Two

19. SELECTED BIBLIOGRAPHY AND SOURCE MATERIALS:

American Heart Association. *Advanced Cardiac Life Support*. 2008. American Heart Association.

Caroline N. 2008. *Emergency Care in the Streets*. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

Elling B, Elling K. 2009. *Pharmacology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

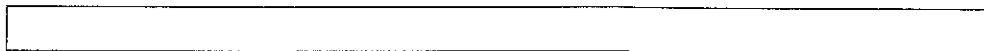
Elling B, Elling K, and Rotheberg M. 2004. *Anatomy and Physiology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Garcia T and Miller G. 2004. *Arrhythmia Recognition-The Art of Interpretation*. Jones and Bartlett Publishers. Sudbury, MA.

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New York State Department of Health Bureau of Emergency Medical Services. *Emergency Medical Technician-Paramedic Curriculum*. Student Manual.



**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK**

1. DEPARTMENT, COURSE NUMBER AND TITLE:

Nursing, EMS 24100, Paramedic Clinical IV

2. DOES THIS COURSE MEET DISTRIBUTION REQUIREMENTS FOR GROUPS I-V? IF SO, WHICH GROUP? N/A

3. TRANSFERABILITY OF THIS COURSE. DESCRIBE HOW THIS COURSE TRANSFERS: N/A

4. BULLETIN DESCRIPTION OF COURSE:

This course is designed to allow the student to continue the individualized experience in the field of emergency medical services in specific areas of preparatory, airway, patient assessment, trauma, medical, special considerations, and operations. This course is the fourth of a four-course clinical sequence. As the final clinical course, students must demonstrate leadership skills on calls. Students will participate in a series of clinical observations (in areas such as adult and pediatric Emergency Departments, critical care units, morgue, labor and delivery units, psychiatric units, and other hospital departments as needed) and ambulance field experiences with a focus on progressively higher levels of patient care responsibilities. Students will complete eight hour shifts in hospitals and with ambulance crews. The number of minimum patient experiences for each student is delineated. Some students, however, may be required to schedule additional shifts to acquire an acceptable minimum of competencies and experiences. Skills are demonstrated and practiced in the laboratory, hospital and/or field setting. Students must satisfactorily perform all practical skills in order to successfully complete the course.

5. NUMBER OF WEEKLY CLASS HOURS (please indicate the number of hours per week spent in a lab, hours spent on site doing fieldwork, hours of supervision and hours in classroom-- if applicable):
24 clinical hours per week for 12-week semester or 48 hours for 6-week module

6. NUMBER OF CREDITS: 3

7. COURSE PREREQUISITES AND COREQUISITES

A. PREREQUISITES: EMS 230, EMS 231

B. COREQUISITES: EMS 240

C. PRE OR COREQ: NONE

8. BRIEF RATIONALE TO JUSTIFY PROPOSED COURSE TO INCLUDE:

There is a need for more certified prehospital care providers. It is necessary to appropriately prepare students with knowledge and skills for them to succeed. This course will provide the student the opportunity to practice the theory in a clinical hospital or field ambulance setting.

9. LIST OF COURSES, IF ANY, TO BE WITHDRAWN WHEN COURSE(S) IS (ARE) ADOPTED: N/A

10. IF COURSE IS AN INTERNSHIP OR INDEPENDENT STUDY OR THE LIKE, PROVIDE AN EXPLANATION AS TO HOW THE STUDENTS WILL EARN THE CREDITS AWARDED. THE CREDITS AWARDED SHOULD BE CONSISTENT WITH STUDENTS' EFFORTS REQUIRED IN A TRADITIONAL CLASSROOM SETTING: N/A

PROPOSED TEXT BOOK(S) AND/OR OTHER REQUIRED INSTRUCTIONAL MATERIAL(S):

American Heart Association. Advanced Cardiac Life Support. 2008. American Heart Association.

Caroline N. 2008. Emergency Care in the Streets. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

12. **REQUIRED COURSE FOR MAJORS AND/OR AREA OF CONCENTRATION?** This is a requirement course for the specialized Emergency Medical Services Program.

13. **IF OPEN ONLY TO SELECTED STUDENTS (specify):**

This course is open to those students who are interested in pursuing the comprehensive preparation of the entire program of Emergency Medical Services leading to certification as a Paramedic.

14. **EXPLAIN WHAT STUDENTS WILL KNOW AND BE ABLE TO DO UPON COMPLETION OF COURSE:**

Upon completion of this course, the student will be able to:

- Demonstrate safe methods for lifting and moving patients in emergency and non-emergency situations using various techniques and apparatus.
- Demonstrate the proper procedures to take for personal protection from disease.
- Demonstrate the use of protective equipment appropriate to the environment and scene.
- Use universal precautions and body substance isolation procedures during medication administration.
- Observe ALS procedures and gain familiarity with said procedures such as but not limited to advanced airway management techniques and intravenous and intraosseous access, and medication administration
- Demonstrate the techniques for scene size up, assessing mental status, assessing the airway, assessing if the patient is breathing, assessing if the patient has a pulse, assessing if the patient has external bleeding
- Demonstrate the ability to triage
- Perform a rapid medical and trauma assessment, a focused history and physical exam of the medical and trauma patient, a detailed physical examination, demonstrate the skills involved in performing the ongoing assessment

- Demonstrate the ability to use the local dispatch communication system, the ability to use a radio, the ability to use the biotelemetry equipment used locally
- Demonstrate the need to undertake a leadership role in the emergency care setting

15. METHODS OF TEACHING --eg., LECTURES, LABORATORIES, AND OTHER ASSIGNMENTS FOR STUDENTS, INCLUDING ANY OF THE FOLLOWING: DEMONSTRATIONS, GROUP WORK, WEBSITE OR E-MAIL INTERACTIONS AND/OR ASSIGNMENTS, PRACTICE IN APPLICATION OF SKILLS:

The course is conducted utilizing practical labs with the use of computer and LCD projector, overhead projector, mannequins (including simulated software and hardware). Skills and clinical evaluations (at hospital and ambulance sites) are utilized to ensure competencies in all subjects.

16. ASSIGNMENTS TO STUDENTS:

Students will be required to read materials including but not limited to the course textbooks and successfully pass the quizzes, exams (both didactic and practical).

17. DESCRIBE METHOD OF EVALUATING LEARNING SPECIFIED IN #15:

Students will be evaluated on their ability to complete assignments and successful passing grade on quizzes and exams. The rubric for the course grade is:

Clinical and field evaluations	40%
Patient logs (completed)	40%
Attendance	20%

18. TOPICAL COURSE OUTLINE (WHICH SHOULD BE AS SPECIFIC AS POSSIBLE REGARDING TOPICS COVERED, LEARNING ACTIVITIES AND ASSIGNMENTS):

Week	Topic	Assignment
1	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
2	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
3	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
4	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites

5	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites
6	Preparatory, anatomy & physiology, medical terminology, patient assessment of the medical and trauma patient, pharmacology, airway management, and medication administration	Various clinical and field rotation sites

19. SELECTED BIBLIOGRAPHY AND SOURCE MATERIALS:

American Heart Association. *Advanced Cardiac Life Support*. 2008. American Heart Association.

Caroline N. 2008. *Emergency Care in the Streets*. 6th ed. Jones and Bartlett Publishers. Sudbury, MA.

Elling B, Elling K. 2009. *Pharmacology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

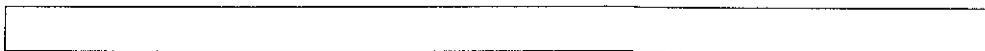
Elling B, Elling K, and Rotheberg M. 2004. *Anatomy and Physiology- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Garcia T and Miller G. 2004. *Arrhythmia Recognition-The Art of Interpretation*. Jones and Bartlett Publishers. Sudbury, MA.

Margolis G. 2004. *Airway Management- Paramedic*. Jones and Bartlett Publishers. Sudbury, MA.

Salmon M and Pollak A. 2009. *Calculations for Medication Administration*. Jones and Bartlett Publishers. Sudbury, MA.

New York State Department of Health Bureau of Emergency Medical Services. *Emergency Medical Technician-Paramedic Curriculum*. Student Manual.



APPENDIX D
SAMPLE PROGRAM SCHEDULING
(SED FORM)

FALL		WINTER		SPRING		SUMMER	
COURSE TITLE	CREDITS	COURSE TITLE	CREDITS	COURSE TITLE	CREDITS	COURSE TITLE	CREDITS
ENG 012-FRESHMAN ENGLISH I	3	EMS 101- EMT CLINICAL	1	BIO 012-ANATOMY AND PHYSIOLOGY 2	4		
BIO 011-HUMAN ANATOMY & PHYSIOLOGY 1	4			MAT 020-ELEMENTS OF STATISTICS	3		
EMS 100- EMT BASIC	5			PSY 011- GENERAL PSYCHOLOGY	3		
				ENG 024- FRESHMAN ENGLISH II	3		
Total Credits	12	Total Credits	1	Total Credits	13	Total Credits	

Year 1 - full time study

FALL		WINTER		SPRING		SUMMER	
Course Title	CREDITS	COURSE TITLE	CREDITS	COURSE TITLE	CREDITS	COURSE TITLE	CREDITS
EMS 210- Paramedic I	7	EMS 220- Paramedic II	5	EMS 230- Paramedic III	7	EMS 240- Paramedic IV	5
EMS 211- Paramedic Clinic I	2	EMS 221- Paramedic Clinic II	3	EMS 231- Paramedic Clinic III	2	EMS 241- Paramedic Clinic IV	3
Total Credits	9	Total Credits	8	Total Credits	9	Total Credits	8

YEAR 2 - full time study

APPENDIX E
FACULTY TEACHING ASSIGNMENTS
(SED FORM)

Course Title	# of Credits	Faculty member assigned to each course (Use "D" to specify Program Director)	Highest earned degree & discipline, college or university	Relevant occupational experience	Relevant other experience (such as certification/license)	Recent scholarly contribution
ENG 012- Freshman English I	3	English dept faculty	Bachelor's or higher	Previous teaching experience	N/A	Scholarly record appropriate to appointment to Assistant Professor
BIO 011- Anatomy and Physiology 1	4	Biology dept faculty	Doctorate preferred	Previous teaching experience and medical experience	N/A	Scholarly record appropriate to appointment to Assistant Professor
EMS 100- EMT Basic	5	D= George Contreras	Doctorate or equivalent such as Masters, curriculum development, supervision experience as well as current Paramedic certification	Curriculum development, director level experience, current paramedic certification and 18 years experience in Emergency Medical Services	Current paramedic certification	Scholarly record appropriate to appointment to Associate Professor
EMS 101- EMT Clinic	1	D= George Contreras	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)
BIO 012- Anatomy and Physiology 2	4	Biology dept faculty	Doctorate preferred	Previous teaching experience and medical experience	N/A	Scholarly record appropriate to appointment to Assistant Professor

ENG 024- Freshman English II	3	English dept faculty	Bachelor's or higher	Previous teaching experience	N/A	Scholarly record appropriate to appointment to Assistant Professor
PSY 011- General Psychology	3	English dept faculty	Bachelor's or higher	Previous teaching experience	N/A	Scholarly record appropriate to appointment to Assistant Professor
MAT 020- Elements of Statistics	3	English dept faculty	Bachelor's or higher	Previous teaching experience	N/A	Scholarly record appropriate to appointment to Assistant Professor
EMS 210- Paramedic I	7	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)
EMS 211- Paramedic Clinic I	2	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)
EMS 220- Paramedic II	5	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)
EMS 221- Paramedic Clinic II	3	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)
EMS 230- Paramedic III	7	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)
EMS 231- Paramedic Clinic III	2	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)
EMS 240- Paramedic IV	5	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)
EMS 241- Paramedic Clinic IV	3	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)	See EMS 100 (Above)

**APPENDIX F
PROJECTED EXPENDITURES
(SED FORM)**

**PROJECTED EXPENDITURES FOR THE PROPOSED PROGRAM
AAS in Emergency Medical Services - Paramedic**

Expenditures	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
<i>Faculty</i>					
New Resources <i>Equipment</i>	\$201,600 ¹	\$238,440 ²	\$242,332	\$246,139	\$250,022
New Resources <i>Supplies & Library acquisitions for program</i>	\$330,000	\$130,000	\$140,000	\$110,000	\$90,000
New Resources	\$20,000	\$23,000	\$26,000	\$26,000	\$28,000
Total					
New Resources	\$551,600	\$391,440	\$408,332	\$382,139	\$368,022

¹ Inflation rate of 2% added each year to the faculty cost. Faculty costs include a full-time instructor and program director, an adjunct medical director, an adjunct instructor and one adjunct college laboratory technician.

² Years Two (2) through Five (5) include one additional adjunct lecturer and a minimum of one additional adjunct college laboratory technician.

**APPENDIX G
PROJECTED REVENUE
(SED FORM)**

PROJECTED REVENUE RELATED TO THE AAS in EMS

Revenues	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
<i>Tuition Revenue</i>					
01. From Existing Sources					
02. From New Sources ¹	<u>\$52,500</u>	<u>\$87,500</u>	<u>\$122,500</u>	<u>\$122,500</u>	<u>\$122,500</u>
03. Total	<u>\$53,500</u>	<u>\$87,500</u>	<u>\$122,500</u>	<u>\$122,500</u>	<u>\$122,500</u>
<i>State Revenue</i>					
04. From Existing Sources					
05. From New Sources ²	<u>\$67,800</u>	<u>\$113,000</u>	<u>\$158,200</u>	<u>\$158,200</u>	<u>\$158,200</u>
06. Total	<u>\$67,800</u>	<u>\$113,000</u>	<u>\$156,200</u>	<u>\$156,200</u>	<u>\$156,200</u>
<i>Other Revenue³</i>					
07. From Existing Sources					
08. From New Sources ⁴	<u>\$431,300</u>	<u>\$192,000</u>	<u>\$98,000</u>	<u>\$73,000</u>	<u>\$88,000</u>
09. Total	<u>\$431,300</u>	<u>\$192,000</u>	<u>\$113,000</u>	<u>\$88,000</u>	<u>\$50,000</u>
<i>Grand Total</i>					
10. From Existing Sources	<u>\$431,300</u>	<u>\$192,000</u>	<u>\$113,000</u>	<u>\$ 88,000</u>	<u>\$ 88,000</u>
11. From New Sources	<u>\$120,300</u>	<u>\$200,500</u>	<u>\$295,700</u>	<u>\$295,700</u>	<u>\$280,700</u>
TOTAL	<u>\$551,600</u>	<u>\$392,500</u>	<u>\$408,700</u>	<u>\$383,700</u>	<u>\$368,700</u>

¹ The full-time CUNY community college tuition of \$1,750 per semester including fees was used for all five years.

² \$2,260 per FTE

³ Combination of Perkins funds and College Operating funds

⁴ Donations of used equipment and money acquired through fundraising

APPENDIX H
FACULTY CURRICULA VITAE

GEORGE W. CONTRERAS, M.S., M.P.H., EMT-P

~~111 West 11th Street, New York, NY 10020~~ (646) 425-8111 | gwcontreras@gmail.com

Dynamic, intelligent, and ambitious healthcare professional with broad based expertise in program development in emergency response, disaster planning, and hospital regulatory compliance. Eager to integrate leadership skills, exceptional business acumen, and extensive public health experience toward supporting the objectives of a progressive healthcare organization.

KEY SKILLS AND COMPETENCIES

Subject Matter Expert in Emergency Medical Services and Emergency Preparedness
Extensive Community Relations Experience
Persuasive and Effective Educator

Experienced and Knowledgeable in Training, Staff Development, Team Building, Hospital Policy and Compliance Requirements
Bilingual - English and Spanish

PROFESSIONAL HISTORY

The GWC Group, LLC

2008 to Present

Emergency Management Consultant

- Provide high level emergency preparedness response and intervention consulting for a variety of corporate clients such as large academic medical centers and private sector companies throughout the United States; deliver effective program development on crisis management, regulatory compliance regarding emergency management, risk management and corporate preparedness.
 - Developed compliance emergency management program for Primary Care Development Corporation to assist primary care clinics regarding emergency preparedness issues and to identify critical program deficiencies.
 - Conducted in-depth risk management assessment for University of Colorado Hospital to develop preparedness response program for the Democratic National Convention; developed comprehensive program to address potential risks, and facilitated response training with key organizational leaders.

NYU Hospitals Center, New York, NY

2005 to 2008

Director, Office of Emergency Management

- Provided strategic leadership for emergency management program response program development for the organization in a post-September 11th era; coordinated JCAHO survey requirements regarding emergency management and ensured compliance with all state, local and federal requirements.
- Served as Co-Chair of Emergency Management Committee and key liaison with partners such as NYU School of Medicine, NYC Department of Health and Mental Hygiene, New York State Department of Health, the Greater New York Hospitals Association, and New York City Office of Emergency Management.
- Developed and delivered training on Incident Command System, Chemical, Biological, Radiological, Nuclear and Explosives preparedness to staff and senior leadership.
- Reviewed, updated, implemented and evaluated new emergency management policies to ensure preparedness in a changing climate; developed a progressive program that effectively incorporated mitigation, preparedness, response and recovery phases into everyday hospital operations.

EDUCATION

The Graduate Center, City University of New York - Doctor of Public Health Concentration in Health Policy and Management	2008- present Expected graduation: June 2012
Iona College, New York, NY - Master of Science Degree, Health Services Administration Concentration in Hospital Administration	2002
Hunter College, The City University of New York - Master of Public Health Degree Concentration in Community Health Education	1994
New York University - Bachelor of Arts Degree, Psychobiology	1991

CERTIFICATIONS AND AFFILIATIONS

Weapons of Mass Destruction (WMD) and Continuity of Operations Planning (COOP) Instructor
American Heart Association-certified BCLS, ACLS, PALS Provider and Instructor
International Association of Emergency Managers (IAEM)
American College of Healthcare Executives (ACHE)
American Public Health Association (APHA)
National Association of Emergency Medical Technicians (NAEMT)

VOLUNTEERISM

NYC Medics, Inc. **Winter 2010**
Team Leader

- Traveled to Haiti and participated in humanitarian medical missions.
- Served as team leader of a multidisciplinary group of paramedics, nurses, physician assistants and physicians to provide emergency medical care at mobile medical clinics in the disaster zone.

Hands for Humanity, Inc. **Fall 2004/Spring 2007/2008/2009/Summer 2009**
Instructor/ Facilitator

- Traveled to Ecuador to lead humanitarian medical and educational missions.
- Provided supplies and training on first aid, CPR and emergency management to various community and governmental organizations.

SHARE, Inc. (Society for Hospital and Resources Exchange) **Summers 2002/2004/2007**
Instructor

- Traveled to Kenya to conduct humanitarian medical and educational missions.
- Provided advanced instruction on CPR, advanced cardiac life support, and emergency management to contribute to the development of an effective infrastructure for a hospital based pre-hospital care and emergency management system.

APPENDIX I
LETTER OF SUPPORT



WYCKOFF

Wyckoff Heights Medical Center

374 Stockholm Street / Brooklyn, NY 11237 / (718) 963-7272

Training Center and EMS
Office: (718) 302-8406
Fax: (718) 628-5100
Physical Address:
348 Stanhope Street
Brooklyn, NY 11237

September 30, 2010

To Whom It May Concern:

This letter is in support of Kingsborough Community College expanding their Sponsorship to conduct Paramedic programs to include original and renewal courses. We already have an affiliation with KCC for their EMT program, allowing their students to satisfy their clinical rotations in our Emergency Department and on our 911 EMS Ambulance units. Since we also have ALS capability, this would offer an opportunity for their Paramedic students to conduct their rotations with us.

Having an EMT and Paramedic program through an established Collegiate educational system such as KCC would improve on the quality of education through the ability to obtain college credits and/or an Associate's degree. It would afford the graduate an advanced status in the job market. The facility is designed for an optimum learning environment. The Director of the program at KCC is a seasoned Paramedic with extensive field, managerial, and educational experience that students would benefit from.

Along the lines of LaGuardia Community College in Queens and BMCC in Manhattan, it would be quite beneficial for those in Brooklyn and Nassau to have a location in Brooklyn for similar educational opportunity. As a Paramedic, it would also afford me better flexibility for undergoing a refresher class in the future. Should you have any questions concerning this issue, please do not hesitate to contact me directly at the contact information below.

Respectfully submitted,

Jack Finkelstein, NREMT-P, CIC
Director of EMS & Training Center
Emergency Preparedness Coordinator
Wyckoff Heights Medical Center
374 Stockholm Street
Brooklyn, NY 11237
Off: 718-302-8407
Fax: 718-628-5100