McHenry County College and McHenry Western Lake County EMS System

PARAMEDIC PROGRAM 2018-2019

09-0620-P-0719





General Orientation and Information Manual Education Policy and Procedure Manual

MCC/MWLC EMS SYSTEMS ADMINISTRATIVE STAFF

EMS Medical Director: John Pacini, D.O.

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EMS System Coordinator: Cindy Amore, BSN

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Asst. EMS Coordinator: Cindy Tabert, EMT-P

(224) 654-0160

EMS Educator/Course Coordinator: Brandy Weirich, BSN TNS LI

(815)276-4460 Cell (815) 759-8046 Office

EMS Educators: Scott Anderson, EMT-P

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MCC/MWLC EMS SYSTEMS PARAMEDIC PROGRAM GENERAL POLICY STATEMENTS

- EMT-B Status: It is YOUR responsibility to maintain your EMT-B license until you are licensed as a paramedic. Failure to do so will result in dismissal from the program.
 ***College credit is not awarded for previous work/life experience.
- 2. <u>State Licensure Exam:</u> The Illinois Department of Public Health requires all candidates for the paramedic license exam to be 18 years of age or older; have a high school diploma or equivalency; and have a current Health Care Provider CPR card.
- Students will be eligible for the IDPH EMT-P licensure exam upon successful completion of all
 didactic and clinical course requirements. You will also be required to have the approval
 from your department preceptor and/or EMS officer validating your competency upon
 completion of the course requirements. This recommendation will be completed in the form
 of the Field Internship, Final Preceptor Approval document.
 - 3. <u>Attendance</u>: Attendance is expected at **all** classes and clinical rotations you are signed up for. However, due to an illness and/or unforeseen occurrence, the student will be allowed the following: *please notify the instructor for any absences*. If you are running late due to a call, written documentation from your superior is required.

Module I: A maximum of 2 excused absences

Module II: A maximum of 2 excused absences

Module III: A maximum of 2 excused absences

Module IV: A maximum of 1 excused absences

Absences in excess of those allowed must be accounted for with additional clinical experience, and may result in lowering the module final grade by one letter grade. Please notify the course coordinator at (815)276-4460 if you are going to be absent from class or a clinical. Please note that Practical Testing Days and a few other selected classes have mandatory attendance (ACLS, PALS, and ITLS). You have been given a syllabus for the year; please make sure to use it when scheduling your activities and vacations. No time off is granted for testing for other departments.

- Once you schedule clinical time, you are expected to attend that clinical session. If you do not attend that clinical session it will be counted as an absence against you (for any reason). Many clinical rotations are secured or are accommodating other types of students. We need to adhere to the schedule we send them. By canceling, you have robbed a fellow student of a possible clinical opportunity.
- Classes will commence at the scheduled time. Students are required to be on time, as not to inconvenience the speakers or other students. Once class has started the door will be shut and you will not be admitted until the next

break. If you have an unforeseen or unusual circumstance, please notify the instructor as soon as possible.

- 4. <u>Missed Exams/Quizzes and Assignments:</u> You are responsible for all material covered on days you are absent. Quizzes must be made up no later than the day you return to class. Missed quizzes due to tardiness can only be made up at the discretion of the instructor. Exam make-ups must be pre-arranged outside of class time, no later than the next scheduled class.
- 5. <u>Class Cancellation:</u> In the event circumstances require cancellation of the class, the student will be notified via text/email. (All students will provide an emergency number/email). All MCC students are encouraged to sign up for MCC RAVE alert. In the event MCC is closed, this alert system will notify students.
- 6. **Grades:** Grades will be issued on a combination of your quizzes, homework, assignments, exams, and finals.

A = 93-100

B = 84-92

C = 75-83

D = 67-74

F = Below 67

You must maintain a 75% exam average and a **75% overall grade average at all time, in order to continue to the next module. This includes successful completion of the module final with a minimum passing score of 75%**. Progress reports will be issued to the student and to the sponsoring agencies. This documents the student's progress in the cognitive, psychomotor, and affective domains.

- 7. Practical Skills: Practical skills are taught throughout the course. You must be "validated" on each skill before performing that skill in either the hospital clinical or the field. You may perform those skills ONLY under the direction of a physician, RN, Prehospital RN, or licensed Paramedic, with a minimum of 1 years' experience and in good standing within the MWLC EMS. You may not perform skills alone. Failure to successfully demonstrate the practical skills taught will result in failure of the course. You will be given a skill booklet in the beginning of the year. It is your responsibility to have this book available for all practical testing and class days. If you lose it you will need to replace it at the cost of \$5.00 per copy.
- 8. <u>Logging of Clinical Time:</u> Clinical time, lab time and skills preformed must be logged into Platinum Planner within 3 days of completing the clinical session *or the clinical will have to be repeated, without exception.* Patient calls and hospital clinical will also be logged on paper clinical tally sheets. Clinical documentation must be complete, legible and organized. The student is required to comply with HIPAA requirements. *Paper work that is incomplete, illegible or not meeting HIPAA standards will be discarded and the student will need to repeat that clinical experience. HIPAA*

- 9. **Break Time:** There will be scheduled breaks during class; you are expected to leave only during this time. In the case of an emergency, you may quietly leave. If this becomes a habit, it may result in notification to your Chief and or dismissal from the program. You are expected to return from breaks as instructed.
- 10. <u>Affective Domain:</u> The student's affective domain will be evaluated in the class room and during *all clinical experiences*. Evaluations need to meet the satisfactory level at minimum. Evaluations that are less than satisfactory will be looked at on an individual basis and may result in dismissal from the program. This gets completed even if you do not have any calls. See the example below:

Evaluator: Please circle the appropriate number, using the following performance scale: 1 = Needs significant improvement 2 = Needs moderate improvement 3 = Appropriate for experience level 4 = Exceptional

Performed	<u>Professional Characteristics</u>
1 2 3 4	Integrity: Consistent honesty, trusted with property of others; trusted with
1 2 3 4	confidential information; complete and accurate documentation Empathy: Showing compassion for others; appropriate response to patients and family members; respect for others; calm, compassionate, helpful demeanor to those in need; supportive and reassuring to others
1 2 3 4	Self-Motivation : Completes assignments without constant supervision; improves and/or corrects behavior; shows enthusiasm for learning; strives for excellence in patient care; accepts constructive feedback; takes advantage of learning opportunities
1 2 3 4	Appearance and Personal Hygiene : Clothing and uniform appropriate, neat, clean and well maintained; good personal hygiene and grooming
1 2 3 4	Self-Confidence : Ability to trust personal judgment; aware of strengths and limitations; exercises good personal judgment
1 2 3 4	Communications : Speaks clearly, writes legibly, listens actively, adjusts communication strategies to various situations
1 2 3 4	Time Management: Consistent punctuality; completes tasks/assignments on time
1 2 3 4	Teamwork and Diplomacy: Places success of team above self-interest; not undermining team; helping and supporting team members; shows respect for all team members; remains flexible and open to change; communicates with others to resolve problems
1 2 3 4	Respect: Polite to others; no derogatory or demeaning terms; behaves in manner that brings credit to the profession
1 2 3 4	Patient Advocacy: Does not allow personal bias/feelings to interfere with patient care; places needs of patient above self-interest; protects and respects patient confidentiality and dignity
1 2 3 4	Careful Delivery of Service: Masters/refreshes skills; performs complete equipment checks; demonstrates careful and safe ambulance operations; follows policies, procedures, and protocols; follows orders

- 11. <u>Syllabus:</u> Each student has been provided access to the syllabus. Any updates will be posted on Canvas for each Module. The syllabus outlines the schedule, current topics, reading assignments, SOP pages to be covered, drugs, skills, and assignments due. These are given to you in advance to help keep you organized. <u>You are expected to be familiar with the material and have read the assignments before the start of each class.</u>
- 12. <u>Prohibited Conduct:</u> All students are expected to adhere to the MCC Code of Conduct as published in the MCC catalogue. Infractions to the code of conduct may result in dismissal from the program and includes:
 - 1) Acts of dishonesty, including but not limited to the following:
 - a. Furnishing false information to any official, EMS instructor or the EMS office.
 - b. Forgery, alteration or misuse of any document, record, or instrument of identification.
 - c. Cheating.
 - 2) Disruption or obstruction of teaching or disciplinary proceedings.
 - 3) Talking between students, while the instructor is lecturing or another student is taking their turn.
 - 4) Physical abuse, verbal abuse, threats, intimidation, harassment, hazing, coercion, and/or other conduct that threatens or endangers the health or safety of any person.
 - 5) Intentional damage, misuse, abuse, or theft of school or classroom property.
 - 6) Violation of HIPAA and confidentiality policies.
 - 7) Violation of the McHenry Western Lake County EMS Systems Policies and Procedures, or the Rules and Regulations Governing Students Participating in EMS Programs.
 - 8) Violation of McHenry County College's Drug and Alcohol use policy, Standards of Conduct, or rules and regulations.
 - 9) Smoking is prohibited on all MCC and Northwestern properties as well as the MCC campus.
 - 10) All pagers, cell phones, and radios <u>must be in silence mode or turned off during class</u>. Cell phones are not to be answered during class, this needs to be done during your scheduled break time. *Cell phones or pagers are not to be on the desk or to be used during class time*.
 - 11) No radios, hand held or portable electronic equipment allowed during class.
 - 12) Theft or abuse of computer information.
 - 13) Conduct that is disorderly, lewd or indecent. Including spitting, belching and flatulence.
- 13. <u>Disciplinary Procedures:</u> Any violation of the above code of conduct will result in disciplinary action up to and including dismissal from the program. This process will begin with the lead instructor for intervention. If this intervention is unsuccessful or disputed, the issue will be referred to the EMS System Coordinator, sponsoring agency Chief and Talia Korunkiewicz, Vice President of Student Affairs. The Medical Director will be notified and a copy of the disciplinary action will remain in the student's file.

2018-2019 MCC/MWLC EMS Paramedic Program Grading Break down per module

Module 1-EMS 120

Final- 40%

Exams 30%

Quizzes 15%- lowest grade dropped ©

Homework/Special assignments-15%

Module 2- EMS 121

Final- 40%

Exams 30%

Quizzes 15%- lowest grade dropped ©

Homework/Special assignments-15%

Module 3- EMS 122

Final- 40%

Exams 30%

Quizzes 10%- lowest grade dropped ©

Homework/Special assignments-20%

Module 4- EMS 123: pass or fail

PALS

ITLS

^{*}Overall pass/fail grade is resulted for MCC, however; your scores will be computed for an overall grade combined with the previous modules for valedictorian and salutatorian of the class!!!!!

*Homework- Mybradylab pretests and Mybradylab"homework" this will be linked through Canvas. This will be due at the end of each module for each correlating chapter. Must be completed by the last day of the module by 0830.

COMMUNICATION POLICY-

Communication between students and instructors is paramount to a successful learning experience. Typically, this communication occurs in the classroom during class hours. However, from time to time, it may be necessary to contact the instructor outside of class hours. As we continue to barrel through an age of constantly evolving technology and social media, it is important that guidelines be established to protect the privacy and personal life of both the students and the instructors. The following has been set forth to govern communication outside of the classroom.

Phone

Although, instructors are not required to provide a phone number other than the office at McHenry County College, each instructor, at his or her discretion may elect to provide students with a secondary number for contact. It is important for students to recognize that this secondary number may be that of a home phone or a cellular phone. Contact at this number should only be used in the event of an emergency where the instructor must be reached immediately. The hours within which a call may be placed to a secondary number will be specified in the Acceptable Communications section of this document. Text messages shall be governed in the same manner as a phone call.

Email

Email has become a widely accepted form of communication. Email is the preferred method of communication outside of the classroom. Each instructor has an email address provided by McHenry County College for students to use to make contact. Due to ease of access, an instructor may elect to provide a different email address for contact. It is important to remember that only class related material may be discussed through email and in no circumstance should an instructor's email be used for solicitation, SPAM, or any other non-class related purpose.

Social Media

We live in an age where social media websites are a part of many people's lives. In order to maintain a strictly professional relationship, communication on a social media website shall be strongly discouraged between a student and an instructor. It is understood that after a class has ended, students and instructors may want to remain in contact. It shall be at the discretion of the instructor whether to allow communication on a social media website after the class has concluded. When participating in social media, the following best practices are recommended: Think twice before posting, strive for accuracy, be respectful, remember your audience and identify your views as your own.

Privacy

The contact information contained in this document is personal and confidential information provided by the instructor, to the students, for the purpose of communicating topics directly related to the associated class. Dissemination of this information to any person outside of the classroom without the direct authorization of the instructor is strictly prohibited. At any time, the instructor may prohibit any student from contact using personal or alternate forms of communication.

FERPA – Family Educational and Privacy Act

Instructors at MCC are bound by the rules of the Family Education and Privacy Act. This act protects the student's right to privacy with respect to the student's education records. Disclosure of the student's education records will typically only be performed with the eligible student physically present. Requests for disclosure of information by an authorized representative or by an eligible student whom is not physically present must be done in writing and submitted directly to the instructor. Prior to providing the requested information, the instructor may need to verify with MCC that an authorized representative is indeed authorized to receive the information. At no time will educational records be discussed with anybody by phone or email unless allowed by FERPA. This **excludes** the sponsoring agency.

Acceptable Communications

Instructor Name: Brandy Weirich	ı, BSN TN	NS, LI Class/Semester: 120,121,122 and 123			
Preferred contact information:	Phone	(815)-276-4460-cell			
	Email	Brandy.weirich@nm.org			
Alternate contact information:	Phone	(815) 759-8046			
	Email	weirichrn@sbcglobal.net, bweirich@mchenry.edu			
Excluding an emergency, you may contact me on the phone number listed above during the hours of <u>0800-1600</u> , <u>Monday-Friday</u> .					

MCC/MWLC EMS SYSTEM PARAMEDIC PROGRAM EMS 120,121,122,123 Syllabus Overview

EMS 120 Module 1 8/20/18 to 12/19/18

ER: 37 Hours
Triage: 8 Hours
Resp Therapy: 5 Hours
OR: 5 Hours

EMS: <u>125 Hours</u> (15 Hours of Direct Patient Contact)

Clinical Hours 180 Didactic Hours 172

EMS 121 Module II 1/2/19 to 3/20/19

ER: 32 Hours
FFL: 8 Hours
ICU: 10 hours
Loyola Burn 8 Hours
Cath Lab 4 Hours
Monitor Room 2 Hours

EMS: 125 Hours (10 hours of Direct Patient Contact)

Clinical Hours 189
Didactic Hours 112

EMS 122 Module III 4/1/19 to 5/22/19

ER: 35 Hours
OB/Neo: 10 Hours
Peds: 5 Hours

EMS: 125 Hours (10 Hours of Direct Patient Contact)

Clinical Hours 175
Didactic Hours 80

EMS 123 Module IV 6/10/19 to 7/3/19

Alternative Hours Due: 35 Hours Total

EMS: <u>125 Hours of Direct Patient Contact</u>)

Clinical Hours 160 Didactic Hours 40

Total Clinical Hours 704
Total Didactic Hours 404
Biology 110 Hours 50

PROCEDURE FOR ACCRUING AND EVALUATING PREHOSPITAL PATIENT CONTACT TIME/PREHOSPITAL CLINICAL EXPERIENCE

<u>CLINICAL TIME:</u> Paramedic students will complete a <u>minimum</u> of 700 clinical hours. This will include a combination of Hospital/Clinical/and other Health services and ambulance field experience.

ACCRUING PATIENT CONTACT TIME:

- 1. Prehospital patient contact time is accrued **from time of dispatch** (contact with patient for private services) **to time of arrival at hospital**, or time of departure from scene if driving or not transporting the patient. Those on a private ambulance will need to complete 6 (12 hour shifts) on a municipal department. It is the student's responsibility to coordinate time with an outside agency. See instructor for contact information and suggestions.
- 2. Patients must be transported to a hospital ED or in-patient unit. Transfers back to the nursing home, patient's home, diagnostic services or procedures, example: dialysis is not included. If there are any questions, please run it by the lead instructor. All final decisions will be at the discretion of the lead instructor.
- 3. Patient may be BLS or ALS. (ALS skills must be performed under the direct supervision of a Paramedic or Prehospital RN licensed for a minimum of one year). You must be running the BLS call and complete the chart to receive credit. No credit for driving.
- 4. Maximum of **60 minutes accrued per ALS** patient contact and **30 minutes maximum for BLS calls, AMA's/Refusals/DOA's**. Adhere to the syllabus for final BLS/ALS requirements. If there is more than one student on a call, only one student can count time for the call.
- 5. When more than one patient is involved in an incident, time is accrued for incident, not for each patient. Module I- 7 hours of patient contact (1/2 half of the pt contact time) can be from BLS calls. Modules 2-4, a total of 5 BLS calls may be used.
- 6. Clinical time and skills preformed must be logged into Platinum Planner within 3 days of completing the clinical session or the clinical will have to be repeated without exception. Patient calls will also be logged on paper clinical tally sheets and scanned into Platinum Planner. Clinical documentation must be complete, legible and organized. The precepting paramedic/nurse must print and sign on the documentation sheet. The student is required to comply with HIPAA requirements. Paper work that is incomplete, illegible or not meeting HIPAA standards will be discarded and the student will need to repeat that clinical experience. Specialty labs must be signed up for within 3 days of announcement (in platinum), when the lab is open and available.
- 7. If you are having problems with your preceptor evaluating your clinical experience in a timely fashion, please let your squad coordinator know ASAP. If this does not correct the problem, let the course coordinator know about the situation.

- 8. All documentation needs to be neat and completely filled out for credit to be given, if not, it will be thrown out. Failure to complete the hands on patient contact requirements by the deadline may result in dismissal from the program.
- 9. Extensions are granted at the discretion of the lead instructor, based on effort and hours logged.

EVALUATING PREHOSPITAL PATIENT CARE EXPERIENCES:

All prehospital patient care experiences are evaluated for the following:

- 1. The patient assessment reflects appropriate recognition of patient needs, ALS or BLS.
- 2. Appropriate ALS care is rendered within a reasonable time frame, by the paramedic student. The successful management will be evaluated with the focus being on the leadership role required to direct the care of a critical/unstable patient, in addition to the following clinical proficiencies. You will be provided with a field internship packet in Module 3; this will need to be completed during the field internship phase.
- 3. Successful demonstration of ALS procedures by the paramedic student: (more than one intervention utilized) Students may only use practical skills that they have covered in class and that have been tested as successfully completed.
 - *IV therapy: successful venipuncture and appropriate administration of fluid
 - *Appropriate medication administration with documentation of patient response
 - *Advanced Airway Management: Recognizing airway compromise and initiating appropriate intervention
 - *Fracture management, immobilization
 - *EKG/12 lead interpretation indicating a need for intervention: cardiac meds, vagal maneuvers, defibrillation, cardioversion, external pacing, or CPR
- 4. Evaluation by the McHenry Western Lake County EMS System Paramedic or Prehospital RN preceptor to reflect:
 - *Effective communication by paramedic student
 - *Student demonstrated proficiency in obtaining a detailed assessment and history
 - *Student demonstrated appropriate priorities in delivery of patient care
 - *Student demonstrated appropriate use of medical/trauma protocol
 - *Student demonstrated proficiency in performing ALS skills
 - *Student demonstrates documentation of assessment, treatment/management and reevaluation of patient

STUDENT CLINICAL GUIDELINES:

<u>OBJECTIVE:</u> In an effort to enhance the learning for each student, a clinical component is required for each of the Paramedic Modules. The goal of this experience is to provide the student with direct patient contact, in an effort to gain experience with assessment and advanced skill proficiency in a controlled, supervised clinical environment. In addition, the clinical exposure will reinforce the patient care theory presented in the classroom.

STUDENT RESPONSIBILITIES:

- 1. Clinical experience will involve patient contact which does bring the risk of contact with infection disease. Therefore, the Student Health Form must be completed and on file with the EMS Office prior to being eligible to schedule clinical experience.
- In the event of exposure to a communicable disease, the student must notify the Charge Nurse in the clinical area, lead instructor and Chief; and proceed in accordance with the McHenry Western Lake County EMS System Policy regarding Infection Control-Body Substance Exposure.
- 3. Emergency Department (ED) clinical sessions, must be scheduled in advance with a minimum of a 2 day notice is required. All ER time must be entered in Platinum. Clinical time scheduled at Good Shepherd Hospital must be coordinated through Brandy.
- 4. All clinical experience must be documented in Platinum Planner and the appropriate Clinical Documentation form for that rotation should be scanned into Platinum. All to include: recorded times of the clinical experience, a minimum of two complete assessments documented for all ER clinicals or specialized clinicals where indicated, and the evaluation/signature of the precepting RN or EMT-P. Your clinical form will not be accepted without being complete and you will have to repeat that clinical experience. All hospital clinical must be turned into the course coordinator within 3 days or it will not be accepted and will have to be repeated. Any specialized clinical forms will be provided in class or on CANVAS.
- 5. ED clinical sessions need to have a minimum of one patient (preferably ALS) documented for each hour you are there (in Platinum). If it was an unusual- slow day please have the ED preceptor document this. If you were with a critical patient for more than one hour, let the lead instructor know how you helped or what was learned and observed.
- 6. Clinical sessions **should not be scheduled in excess of** 8 **hour increments**. However, at the request of the staff, additional time may be completed if the patient census and/or learning opportunities support additional time. You must notify the lead instructor should you be asked to stay past the 8 hours-make note on your document form.
- 7. Failure to complete the clinical requirements by the deadline established for each module may result in dismissal from the program.

- 8. Northwestern McHenry ED: 2 paramedic students maximum at one time, Northwestern Woodstock ED- 1 paramedic student maximum at one time, and Northwestern Huntley ED- 1 maximum paramedic student at one time. Good Shepherd ED varies, see calendar.
- 9. Conduct in the clinical area should be professional **at all times**. Dress code includes: departmental uniform shirt or shirt with a collar, dark slacks, and dark shoes. If the clinical department requires scrubs they will be made available to you. *T-shirts, jeans, hats and white athletic shoes are not acceptable*. Artificial nails may not be worn by students that care for patients. Per Northwestern's Infection Control, artificial nails also include over lays, tips, extensions and wraps.
- *** Each student must come prepared with a watch with a second hand, stethoscope, and EMT-P student ID. Gum chewing is not allowed in the clinical area, while providing patient care. Keep in mind each student must present a professional appearance at all times, as they are perceived as a member of the hospital healthcare team. Tattoos must be covered. Body piercings, multiple ear piercings or ear gauging, must not be visible. Those wearing earrings should avoid dangling earrings.
- 10. If attire is deemed inappropriate the student will not be permitted to complete their clinical experience for that day (no exceptions).
- 11. Upon arrival to the clinical area, the student should notify the Charge Nurse, who will be responsible for introducing a clinical preceptor and making patient assignments. It is the student's responsibility to make the preceptor aware of his present skill proficiency. The Clinical Preceptor will allow the student to provide patient care at his/her discretion, based on the best interest of providing quality patient care.
- 12. **All advanced skills performed in the clinical area, must first be completed in the classroom setting, where individual proficiency has been evaluated and recorded. This information will be communicated to the clinical areas by the lead instructor. All advanced skills performed during the clinical experience must be performed under the direct supervision of a MD or RN involved in the patient's care.
- 13. If it is discovered, that a student is not actively involved in their clinical experience, the clinical time will not be credited. Your documentation needs to reflect your activity.
- 14. If there are any concerns or problems during the clinical experience, the student should talk to the Charge Nurse at that time and later discuss the same issue with the lead Instructor or the EMS Coordinator.
- 15. **Patient confidentiality is mandatory**. All information related to the patient's care by the student during the clinical experience must be maintained confidential. Breach of confidentiality is grounds for *immediate* dismissal from the program.

CLINICAL OBJECTIVES:

The student may expect the following experiences in each of the identified clinical areas.

EMERGENCY DEPARTMENT

- 1. Introduction to ED equipment and its use.
- 2. Observation of the EMS communications system utilized via MERCI and Telemetry radio and telephone equipment.
- 3. Observe and participate in all phases of patient care under the direct supervision of an RN or MD.
- 4. Refine patient assessment skills including: Performing assessments, reassessment, obtaining vital signs, breathe sounds, neurovascular assessment. You are required to complete a minimum of two full clinical assessments using the forms provided for each clinical. These need to be complete and signed off or they will not be accepted and may result in having to repeat that clinical time. (this is for mod I only)
- 5. Obtain SAMPLE history, and identify patient's chief complaint.
- 6. Assemble IV therapy equipment and perform venipuncture for peripheral fluid therapy or medication administration. **
- 7. Administer medications in accordance with the EMS System Protocol via the IM, SQ, IV, IO, IN, IR (SL) or aerosol method of delivery, as well as instillation of eye drops. **
- 8. Assist with Cardiac Arrest cases, performing CPR and routine cardiac/ALS care under direct supervision of the preceptor.
- 9. Assist with Trauma cases, reviewing the triage process, assisting in hemorrhage control, splinting, cast application.
- 10. Assist in airway maintenance, utilizing advanced airway skills. **
- 11. Identify the EKG rhythm disturbances and the appropriate treatment modalities. **
- 12. Assist with cardioversion and external cardiac pacing. **

ICU/CARDIAC SURVEILLANCE (has a special clinical form)

- 1. Observe and assist in patient assessment. One full patient assessment form required for each 5 hours of ICU clinical.
- 2. Review case scenarios regarding history, diagnosis and treatment.
- 3. Assemble IV therapy equipment and perform venipuncture for peripheral fluid therapy or medication administration. **
- 4. Administer parenteral medications in accordance with the EMS System Protocol via the IM, SQ, IV, IO, IN, or aerosol method of delivery, as well as instillation of eye drops. **
- 5. Observe other methods of invasive hemodynamic monitoring and specialized procedures.
- 6. Assist with airway maintenance in ventilatory assisted patients. **
- 7. Perform CPR.
- 8. Identify EKG rhythm disturbances and the appropriate treatment modalities. **
- 9. Assist with cardioversion and external pacing. **

CARDIAC CATH LAB/ANGIOGRAPHY (has a special clinical form)

- 1. Observe the physical assessment of the patient prior to the procedure.
- 2. Observe the procedure with attention to the anatomy and pathology presented.
- 3. Identify EKG rhythm disturbances and the appropriate treatment modalities. **

PEDIATRICS (has a special clinical form)

- 1. Observe the contrast in assessment of the pediatric patient in comparison to the management of the adult.
- 1. Increase an awareness of the developmental stages of the pediatric patient as it affects the delivery of patient care.
- 2. Assist in the administration of IV fluid therapy and medications in accordance with the EMS System Protocol. **
- 3. Assist with pediatric patient care, including patient assessment, vital signs and airway management. **

OB/LABOR AND DELIVERY/NEONATAL NURSERY (has a special clinical form)

- 1. Orient to OB equipment and its use.
- 2. Observe fetal monitoring and assessment of fetal heart tones.
- 3. Observe and assist in a vaginal delivery if possible.
- 4. Observe delivery via C-section, if possible.
- 5. Assist in the assessment and care of the newborn.
- 6. Assemble IV therapy equipment and perform venipuncture for peripheral fluid therapy or medication administration. **Administer parenteral medications in accordance with the EMS System Protocol via the IM, SQ, IV, IO, IN, IR (SL) or aerosol method of delivery as well as instillation of eye drops. **

<u>AUTOPSY</u> (has a special form-observational form)

Observe the anatomy and pathology associated with the disease process or trauma.

FLIGHT FOR LIFE (has a special form-observational form)

- 1. To observe/assist with the assessment/management of the critical patient requiring air transport.
- 2. Participate in pre-flight safety in-service.
- 3. Assist in the administration of IV fluid administration and medication in accordance to the EMS System Protocol. **

RESPIRATORY THERAPY (has a special form)

- 1. Observe and participate in all phases of patient care under the direct supervision of the Preceptor including, Discuss the anatomy and physiology of the respiratory system and the pathophysiology of respiratory diseases
- 2. Develop and refine respiratory assessment skills.
- 3. Observe and participate with airway management: Spo2 monitoring, capnography, ABGs, BVM's, ventilators, peak flow monitoring, C-PAP and Bi-PAP
- 4. Observe and participate with medication administration using the aerosol method of delivery in accordance with the EMS System Protocol.

ANESTHSIA/SURGERY (has a special form)

- 1. Discuss the anatomy and physiology of the respiratory system as well as the proper technique for direct laryngoscopy, insertion and maintenance of an endotracheal tube.
- 2. Observe the proper technique for direct laryngoscopy, insertion and maintenance of an endotracheal tube.
- 3. Discuss interventions in maintaining airway control.
- 4. Observe and assist in maintaining airway control.
- 5. Observe surgical procedures.

BURN UNIT (has a special form)

- 1. To observe the assessment/management of the critical burn patient.
- 2. Discuss the immediate assessment and management concerns of the acutely burned patient.
- 3. Discuss altered physiology of the healing burn patient.
- 4. Discuss management challenges regarding these specialty patients.

MCC/MWLC Clinical Alternatives Options:

You will need to do an additional **35 hours of alternative time** to fulfill your clinical requirements. You have until July 3, 2019 to finish your alternative hours. In some cases, you will directly schedule the clinical yourself; in other cases, *I will schedule it for you* (noted by an * symbol). Some of these clinical experiences will have a special clinical form to use. *If it is not listed on this form, you must clear it with me in order to receive credit.*

<u>Option</u>		Max Total Hours
1.	Extra ER time	20
2.	Extra ICU time must be pre-arranged ***	5
3.	Extra Flight time must be pre-arranged ***	8
4.	Extra OB time must be pre-arranged ****	5
5.	Cardiac Cath Lab (McH or Huntley) must be pre-arranged ***	4
6.	Cardiac monitor room must be pre-arranged ***	2
7.	Helper for ACLS/PALS/BTLS	10
8.	Assistant for the EMT-B/first responder clinical skills lab	20
9.	Disaster Drill Victim (I need to approve it first)	10
10.	Autopsy time	-
11	Attend a seminar that is pertinent to EMS . It must be approved through me first. I need to have a copy of the syllabus and proof that you attended. I will determine on a individual basis how much time will be credited.	-
12.	Patient contact time above and beyond the hours needed.	-
13.	Completing online <u>paramedic</u> CEU's (mandatory or optional) offere through the Northwestern website (1/2 hour each quiz)	ed -
14.	Attend any system paramedic CEU provided by the MWLC EMS Offi	i ce 5
15.	Serving on a medical team for a 5K or triathlon/marathon	5