CMH EMS Education Manual

Part 0 - Front Matter

Section 0.190 - Approval Signatures

Version number: Version 11 (8/1/19)

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I certify the content and policy to be true and correct.

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Section 0.380 - Scope

This manual applies to all CMH EMS employees when providing or attending any training activities and to students attending training provided by CMH EMS Education. According to the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP), the following is the description of the profession:

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

Section 0.570 - Online Location

The most recent version of this document can be found here: http://ozarksems.com/cmh-ems-education-manual.pdf



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Part 1 - Administration Manual

Section 1.040 - Mission Statements

<u>CMH Vision</u>: Be the first choice for customer focused healthcare to every generation.

<u>CMH Mission</u>: Caring for every generation through exceptional services by leading physicians and a compassionate healthcare team.

CMH Values: I am Positive, Respectful, Innovative, Dedicated, and Empowered.

<u>CMH EMS Mission</u>: To provide safe, exceptional, and compassionate care to our communities with an emphasis on highly trained and empowered staff.

<u>CMH EMS Education Mission</u>: To provide state-of-the-art education to develop and support a team of exceptional emergency medical professionals.

Section 1.080 - Accreditation Standards

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).

The following sections are organized according to those accreditation Standards and Guidelines, which are the minimum standards of quality used in accrediting programs that prepare individuals to enter the Emergency Medical Services professions.

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard I.A Sponsoring Institution	A sponsoring institution must be at least one of the following, and must either award credit for the program or have an articulation agreement with an accredited post-secondary institution. A post-secondary academic institution accredited by an institutional accrediting agency that is recognized by the U.S. Department of Education, and authorized under applicable law or other acceptable authority to provide a post-secondary program, which awards a minimum of a diploma / certificate at the completion of the program.	Articulation agreements with Southwest Baptist University (SBU) and Bolivar Technical College (BTC) are on file with the Program Director. Copies of associated accreditation are also on file.
	The Sponsor must ensure that the provisions of these Standards and Guidelines are met.	Section 1.480 - EMS Education Advisory Board (page 54). The Advisory Board has representation from sponsoring institutions. Minutes of Advisory Board meetings are on file with the Program Director which reflect reviewing standards and guidelines and accreditation status.

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard II.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.	Sub-Section 3.490.02 - Paramedic Academy Goal (page 135).
	The communities of interest that are served by the program must include, but are not limited to: students, graduates, faculty, sponsor administration, hospital/clinic representatives, employers, police and/or fire services with a role in EMS services, key governmental officials, physicians, and the public. The Advisory Committee should have significant representation and input from non-program personnel. Advisory committee meetings may include participation by synchronous electronic means.	Section 1.480 - EMS Education Advisory Board (page 54).
	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 the mission of the sponsoring institution(s), the expectations of the communities of interest, and nationally accepted standards of roles and functions. 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.	Copies of Advisory Board meeting minutes are on file with the Program Director which reflect approval of program goals.

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard II.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.	Copies of Advisory Board meeting minutes are on file with the Program Director which reflect approval of program goals and learning domains.
	An advisory committee, which is representative of at least each of the communities of interest named in these Standards, 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, and to review and endorse the program required minimum numbers of patient contacts.	Section 1.480 - EMS Education Advisory Board (page 54).

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard II.C Minimum Expectations	The program must have the following goal defining minimum expectations • Paramedic: "To prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains with or without exit points at the Advanced Emergency Medical Technician and/or Emergency Medical Technician, and/or Emergency Medical Responder levels."	- Paramedic Academy Goal (page 135). - Paramedic Academy Goal (page 135). - Paramedic Academy Goal (page 135). - Paramedic Academy Goal (page 135).
	Advanced Emergency Medical Technician: "To prepare competent entry-level Advanced Emergency Medical Technician in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains."	No AEMT program currently exists
	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 with or without exit points at the Emergency Medical Technician, and/or Emergency Medical Responder levels.	No additional goals have been identified.
	Nothing in this Standard restricts programs from formulating goals beyond entry-level competence.	

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard III.A.1 Program Resources	Program resources must be sufficient to ensure the achievement of the program's goals and outcomes.	Section 1.560 - Program Evaluations (page 58). Results of student, faculty, and employer surveys are on file with the Program Director. Copies of Advisory Board minutes are on file with the Program Director which reflect reviewing these survey results.
	Resources must include, but are not limited to: faculty; clerical and support staff;	Section 1.240 - Faculty, General (page 35). Section 1.280 - Faculty, Program Director (page 36). Section 1.360 - Faculty, Paramedic Lead Instructor (page 46). Section 1.440 - Faculty, Guest Instructors (page 52).
	curriculum;	Sub-Section 3.490.10 - Paramedic Academy Curriculum (page 139).
	finances;	Section 1.160 - Training Budget (page 29).
	offices; classroom, laboratory, and, ancillary student facilities; equipment; supplies; computer resources; instructional reference materials,	Section 1.520 - Physical Facilities (page 56).
	clinical affiliates;	Copies of all affiliation agreements are on file with the Program Director.
	and faculty/staff continuing education.	Section 1.400 - Faculty, Field Training Officers (page 50).

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard III.A.2 Hospital / Clinical Affiliations and Field / Internship Affiliations	For all affiliations, students must have access to adequate numbers of patients, proportionally distributed by age-range, chief complaint and interventions in the delivery of emergency care appropriate to the level of the Emergency Medical Services Profession(s) for which training is being offered. The clinical/field experience/internship resources must ensure exposure to, and assessment and management of the following patients and conditions: adult trauma and medical emergencies; airway management to include endotracheal intubation; obstetrics to include obstetric patients with delivery and neonatal assessment and care; pediatric trauma and medical emergencies including assessment and management; and geriatric trauma and medical emergencies.	Section 1.560 - Program Evaluations (page 58). Results of student, faculty, and employer surveys are on file with the Program Director. Copies of Advisory Board minutes are on file with the Program Director which reflect reviewing these survey results. Section 1.680 - Course and Student Records (page 61). Student records are available to reflect actual number of patient contacts per clinical hour obtained by previous students in all of the listed categories.

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard III.B.1 Program Director	 The program director must be responsible for all aspects of the program, including, but not limited to: The administration, organization, and supervision of the educational program, The continuous quality review and improvement of the educational program, Long range planning and ongoing development of the program, The effectiveness of the program, including instruction and faculty, with systems in place to demonstrate the effectiveness of the program, Cooperative involvement with the medical director, The orientation/training and supervision of clinical and field internship preceptors The effectiveness and quality of fulfillment of responsibilities delegated to another qualified individual. Possess a minimum of a Bachelor's degree to direct a Paramedic program and a minimum of an Associate's degree to direct an Advanced Emergency Medical Technician program, from an accredited institution of higher education. Program Directors should have a minimum of a Master's degree. Have appropriate medical or allied health education, training, and experience, Be knowledgeable about methods of instruction, testing and evaluation of students, Have field experience in the delivery of out-of-hospital emergency care, Have academic training and preparation related to emergency medical services at least equivalent to that of a paramedic, Be knowledgeable about the current versions of the National EMS Scope of Practice and National EMS Education Standards, and about evidenced-informed clinical practice. For most programs, the program director should be a full-time position. 	Section 1.280 - Faculty, Program Director (page 36).

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard III.B.2 Medical Director	 The medical director must be responsible for medical oversight of the program, and must: Review and approve the educational content of the program curriculum for appropriateness, medical accuracy, and reflection of current evidence-informed pre-hospital or emergency care practice. Review and approve the required minimum numbers for each of the required patient contacts and procedures listed in these Standards. Review and approve the instruments and processes used to evaluate students in didactic, laboratory, clinical, and field internship, Review the progress of each student throughout the program, and assist in the determination of appropriate corrective measures, when necessary. Corrective measures should occur in the cases of adverse outcomes, failing academic performance, and disciplinary action. Ensure the competence of each graduate of the program in the cognitive, psychomotor, and affective domains, Engage in cooperative involvement with the program director, Ensure the effectiveness and quality of any Medical Director responsibilities delegated to another qualified physician. Ensure educational interaction of physicians with students. The Medical Director interaction should be in a variety of settings, such as lecture, laboratory, clinical, field internship. Interaction may be by synchronous electronic methods. The Medical Director must: Be a physician currently licensed and authorized to practice in the location of the program, with experience and current knowledge of emergency care of acutely ill and injured patients, 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, Be an active member of the local medical community and participate in professional activities related to out-of-ho	Section 1.200 - Medical Director (page 30).

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard III.B.5 Faculty / Instructional Staff	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. 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.	Section 1.400 - Faculty, Field Training Officers (page 50).
	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.	Section 1.440 - Faculty, Guest Instructors (page 52).

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard III.B.6. - Lead Instructor	When the Program Director delegates specified responsibilities to a lead instructor, that individual must:	Section 1.360 - Faculty, Paramedic Lead Instructor (page 46).
	 Perform duties assigned under the direction and delegation of the program director. The Lead Instructor duties may include teaching paramedic or AEMT course(s) and/or assisting in coordination of the didactic, lab, clinical and/or field internship instruction. The Lead Instructor must possess: A minimum of an associate degree. Lead Instructors should have a bachelor's degree. Professional healthcare credential(s) Experience in emergency medicine / prehospital care, Knowledge of instructional methods, and Teaching experience to deliver content, skills instruction, and remediation. The Lead Instructor role may also include providing leadership for course coordination and supervision of adjunct faculty/instructors. 	

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard III.C	The curriculum must ensure the achievement of program goals and learning domains. Instruction must be an	Sub-Section 3.490.10 - Paramedic Academy Curriculum (page 139).
Curriculum	appropriate sequence of classroom, laboratory, clinical/field experience, and field internship activities.	Sub-Section 3.490.38 - Paramedic Academy Academic Progress (page 158).
	Progression of learning must be didactic/laboratory integrated with or followed by clinical/field experience followed by the capstone field internship, which must occur after all core didactic, laboratory, and clinical experience.	
	Instruction must be based on clearly written course syllabi that include course description,	Sub-Section 3.490.34 - Paramedic Academy Classroom Details (page 154).
	course objectives,	Sub-Section 3.490.02 - Paramedic Academy Goal (page 135).
	methods of evaluation,	Sub-Section 3.490.40 - Paramedic Academy Grade Calculation (page 160).
	topic outline,	Sub-Section 3.490.50 - EMS 501 (First Trimester Paramedic) Course (page 170).
		Sub-Section 3.490.58 - EMS 511 (Second Trimester Paramedic) Course (page 183).
		Sub-Section 3.490.64 - EMS 521 (Third Trimester Paramedic) Course (page 197).
	and competencies required for graduation.	Sub-Section 3.490.76 - Paramedic Academy Terminal Competency Form (page 212).
	The program must demonstrate by comparison that the curriculum offered meets or exceeds the content and	Sub-Section 3.490.10 - Paramedic Academy Curriculum (page 139).

CAAHEP Standard	Standard Details	Documentation of meeting the standard
	competency of the latest edition of the National EMS Education Standards.	
	The program must set and require minimum numbers of patient/skill contacts for each of the required patients and conditions listed in these Standards,	Sub-Section 3.490.46 - Paramedic Academy Laboratory, Scenario, and Simulation Requirements (page 162).
		Sub-Section 3.490.48 - Paramedic Academy Clinical Requirements (page 166).
	and at least annually evaluate and document that the established program minimums are adequate to achieve entry-level competency.	Results of student, faculty, and employer surveys are on file with the Program Director. Copies of Advisory Board minutes are on file with the Program Director which reflect reviewing these survey results.
	Further pre-requisites and/or corequisites should be required to address competencies in basic health sciences (Anatomy and Physiology)	Sub-Section 3.490.56 - BIO 111 (Anatomy and Physiology I) Course (page 182). Sub-Section 3.490.62 - BIO 211 (Anatomy and Physiology II) Course (page 196).
	and in basic academic skills (English and Mathematics).	Degree requirements for general education courses are specifically listed in each of the articulations agreements which are on file with the Program Director.
	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.	Sub-Section 3.490.70 - EMS 536 (Paramedic Field Internship) Course (page 206).
	AEMT is based on competency, but may be typically 150-250 beyond EMT, which is 150-190, and may be taught separately or combined.	No AEMT program currently exists.

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard III.D Resource Assessment	The program must, at least annually, assess the appropriateness and effectiveness of the resources described in these Standards. The program must include results of resource assessment from at least students, faculty, medical director(s), and advisory committee using the CoAEMSP resource assessment tools. 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.	Section 1.560 - Program Evaluations (page 58). Results of student, faculty, and employer surveys are on file with the Program Director. Copies of Advisory Board minutes are on file with the Program Director which reflect reviewing these survey results.

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard IV.A Student Evaluation	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. Achievement of the program competencies required for graduation must be assessed by criterion-referenced, summative, comprehensive final evaluations in all learning domains.	Sub-Section 3.490.40 - Paramedic Academy Grade Calculation (page 160).
	Records of student evaluations must be maintained in sufficient detail to document learning progress and achievements, including all program required minimum competencies in all learning domains in the didactic, laboratory, clinical and field experience/internship phases of the program.	Section 1.680 - Course and Student Records (page 61).
	The program must track and document that each student successfully meets each of the program established minimum patient/skill requirements for the appropriate exit point according to patient agerange, chief complaint, and interventions.	Sub-Section 3.490.46 - Paramedic Academy Laboratory, Scenario, and Simulation Requirements (page 162).
		Sub-Section 3.490.48 - Paramedic Academy Clinical Requirements (page 166).

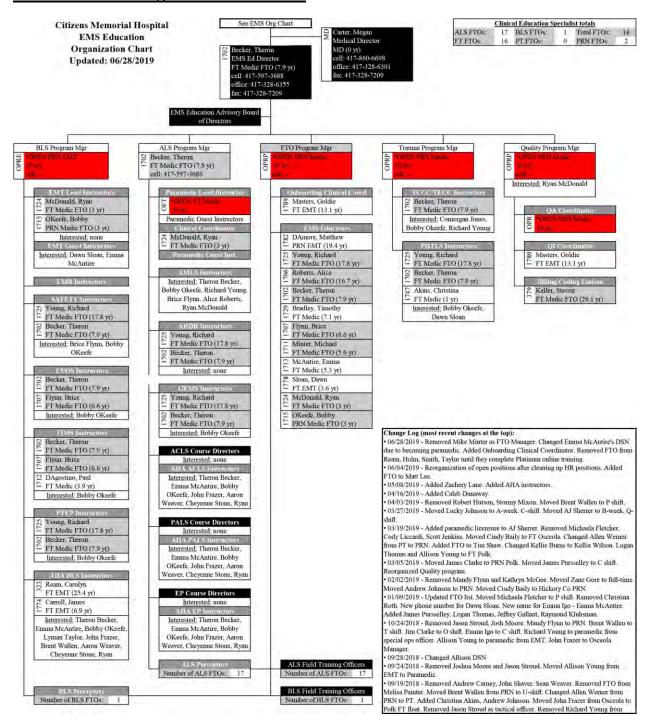
CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard IV.B Outcomes	The program must periodically assess its effectiveness in achieving its stated goals and learning domains. The results of this evaluation must be reflected in the review and timely revision of the program. Outcomes assessments must include, but are not limited to: national or state credentialing examination(s) performance, programmatic retention/attrition, graduate satisfaction, employer satisfaction, job (positive) placement, and programmatic summative measures (i.e. final comprehensive students evaluations in all learning domains). The program must meet the outcomes assessment thresholds established by the CoAEMSP.	Section 1.720 - Academy Statistics (page 61).
	"Positive placement" means that the graduate is employed full or part-time in the profession or in a related field; or continuing his/her education; or serving in the military. A related field is one in which the individual is using cognitive, psychomotor, and affective competencies acquired in the educational program.	
	The program must periodically submit to the CoAEMSP the program goal(s), learning domains, evaluation systems (including type, cut score, and appropriateness/validity), outcomes, its analysis of the outcomes, and an appropriate action plan based on the analysis.	
	Programs not meeting the established thresholds must begin a dialogue with the CoAEMSP to develop an appropriate plan of action to respond to the identified shortcomings.	

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard V.A Publications and	Announcements, catalogs, publications, and advertising must accurately reflect the program offered.	Part 2 - Student Manual (page 56). Section 3.490 - Paramedic Academy (page 135).
Disclosure	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, mailing address, web site address, and phone number of the accrediting agencies;	Sub-Section 3.490.04 - Paramedic Academy Accreditation (page 136).
admissions policies and practices, including technical standards (when used);		Sub-Section 3.490.12 - Paramedic Academy Prerequisites (page 140). Sub-Section 3.490.20 - Paramedic Academy Application and Selection Process (page 148).
	policies on advanced placement,	Sub-Section 3.490.24 - Paramedic Academy Military Advanced Placement (page 149). Sub-Section 3.490.26 - Paramedic Academy Projectored Nurses Advanced Placement (page 149).
		Registered Nurse Advanced Placement (page 151). Sub-Section 3.490.28 - Non-Accredited
		Paramedic Graduate Advanced Placement (page 152). Sub-Section 3.490.32 - Paramedic Academy
	transfer of credits,	Retake Advanced Placement (page 153). Sub-Section 3.490.30 - Paramedic Academy
	transfer of electrics,	Anatomy and Physiology Transfer Credit (page 152).
	and credits for experiential learning;	Sub-Section 3.490.22 - Paramedic Academy Experiential Learning (page 148).
	number of credits required for completion of the program;	Sub-Section 3.490.38 - Paramedic Academy Academic Progress (page 158).

CAAHEP Standard	Standard Details	Documentation of meeting the standard
	tuition/fees and other costs required to complete the program;	Sub-Section 3.490.16 - Paramedic Academy Tuition Details (page 143).
	policies and processes for withdrawal and for refunds of tuition/fees.	Section 2.200 - Refund Policy (page 70).
	At least the following must be made known to all students: academic calendar,	Section 2.720 - Generic Education Calendar (page 87).
	student grievance procedure,	Section 2.480 - Appeal and Grievance Procedure (page 80).
	criteria for successful completion of each segment of the curriculum and for graduation,	Sub-Section 3.490.38 - Paramedic Academy Academic Progress (page 158).
	and policies and processes by which students may perform clinical work while enrolled in the program.	Sub-Section 3.490.52 - EMS 506 (Paramedic Clinical Experience I) Course (page 177). Sub-Section 3.490.60 - EMS 516 (Paramedic Clinical Experience II) Course (page 189).
		Sub-Section 3.490.66 - EMS 526 (Paramedic Field Experience) Course (page 203).
		Sub-Section 3.490.70 - EMS 536 (Paramedic Field Internship) Course (page 206).
	The sponsor must maintain, and make available to the public, current and consistent summary information about student/graduate achievement that includes the results of one or more of the outcomes assessments required in these Standards.	Section 1.720 - Academy Statistics (page 61).
	The sponsor should develop a suitable means of communicating to the communities of interest the achievement of students/graduates (e.g., through a website or electronic or printed documents).	

CAAHEP Standard	Standard Details	Documentation of meeting the standard
CAAHEP Standard V.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.	Refer to CMH Employee Policies.
	A program conducting educational activities in other State(s) must provide documentation to CoAEMSP that the program has successfully informed the state Office of EMS that the program has enrolled students in that state.	No activities occur in other states.
CAAHEP Standard V.C. - Safeguards	The health and safety of patients, students, faculty, and other participants 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.	Sub-Section 3.490.48 - Paramedic Academy Clinical Requirements (page 166).
CAAHEP Standard V.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.	Section 1.680 - Course and Student Records (page 61).
CAAHEP Standard V.E. - Substantive Change	The sponsor must report substantive change(s) 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: 1. Change in sponsorship 2. Change in location 3. Addition of a satellite location 4. Addition of a distance learning program	NA
CAAHEP Standard V.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, roles, and responsibilities of the sponsor and that entity.	Copies of all articulation and affiliation agreements are on file with the Program Director.

Section 1.120 - Organizational Chart



Section 1.160 - Training Budget

Sub-Section 1.160.24 - Training Budget Purpose

Provide fiscal support for personnel, acquisition, and maintenance of equipment, supplies, and faculty/staff continuing education.

Sub-Section 1.160.48 - Previous Budgets

The 2016-2017 budget was integrated into the operations budget and was about \$8,000.

The 2017-2018 budget was the first year for a standalone EMS Education Department. Budget was \$206,000 with an expected income of \$117,000.

The 2018-2019 budget was \$165,000 with an expected income of \$129,000.

Sub-Section 1.160.72 - Current Budget

The current 2019-2020 budget is \$187,000 with an expected income of \$90,000.

Section 1.200 - Medical Director

Sub-Section 1.200.11 - Medical Director Purpose

Fulfill responsibilities specified in CoAEMSP accreditation standard III.B.2.a and meet qualifications specified in CoAEMSP accreditation standard III.B.2.b.

Sub-Section 1.200.22 - Medical Director Responsibilities

These responsibilities are based on CoAEMSP Accreditation Standard II.B.2.a. The medical director must be responsible for medical oversight of the program and must:

- 1. Review and approve the educational content of the [EMT and paramedic] program['s] curriculum for appropriateness, medical accuracy, and reflection of current evidence-informed pre-hospital or emergency care practices.
- 2. Review and approve the required minimum numbers for each of the required patient contacts and procedures listed in [this document for the EMT and paramedic programs].
- 3. Review and approve the instruments and processes used to evaluate students in didactic, laboratory, clinical, and field internship.
- 4. Review the progress of each student throughout the [EMT and paramedic] program, and assist in the determination of appropriate corrective measures, when necessary. Corrective measures should occur in the cases of adverse outcomes, failing academic performance, and disciplinary action.
- 5. Ensure the competence of each graduate of the [EMT and paramedic] program[s] in the cognitive, psychomotor, and affective domains.
- 6. Engage in cooperative involvement with the [EMT and paramedic] program director.
- 7. Ensure the effectiveness and quality of any Medical Director responsibilities delegated to another qualified physician.
- 8. Ensure educational interaction of physicians with students. The Medical Director interaction should be in a variety of settings, such as lecture, laboratory, clinical, and field internship. Interaction may be by synchronous electronic methods.

These responsibilities are based on the NAEMT PHTLS Instructor's Manual. The course medical director has the following responsibilities:

- 1. The course medical director will be available, on site or by telephone, to the course coordinator to address medical questions that may arise in the progress of the course.
- 2. Ideally, the course medical director should actively participate in the course by lecturing, presenting skill stations, or evaluating students.
- 3. The course medical director will advise the national, regional, or state coordinator of any problems with courses or instructors in writing in a timely manner.

Sub-Section 1.200.33 - Medical Director Qualifications

These qualifications are based on CoAEMSP Accreditation Standard II.B.2.b. The Medical Director must:

- 1. Be a physician currently licensed and authorized to practice in the location of the program, with experience and current knowledge of emergency care of acutely ill and injured patients.
- 2. Have adequate training and 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 Emergency Medical Services Professions.

These qualifications are based on NAEMT PHTLS Instructor's Manual.

1. The course medical director must be a licensed physician who is an ATLS or PHTLS provider and preferably an ATLS or PHTLS instructor.

Sub-Section 1.200.44 - Medical Director Job Description

Official job description can be found on the CMH Intranet at: F:\Depts\All_Depts\CMH Policies & Forms\JobDesc\Hospital\Emergency Department

Sub-Section 1.200.55 - Medical Director Appointment Letter

Date: August 1st, 2019

Tony Cauchi 1500 N Oakland Ave. Bolivar, MO 65613

Re: MD Appointment/Acceptance

Dear Dr. Cauchi:

Citizens Memorial Hospital is delighted to appoint <u>Tony Cauchi, MD</u> to serve as Medical Director effective August 1st, 2019.

<u>Dr. Cauchi</u> appears to meet the following Medical Director qualifications as validated by their current Curriculum Vitae and State Medical license:

Qualifications - The Medical Director must:

- 1. Be a physician currently licensed and authorized to practice in the location of the program, with experience and current knowledge of emergency care and 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 issued regarding the education of the Emergency Medical Services Professions.

Signature of Chief Executive Officer

Date

8-21-19

Sub-Section 1.200.66 - Medical Director Acceptance Letter

Date: August 1st, 2019

Donald Babb 1500 N Oakland Ave. Bolivar, MO 65613

Re: MD Appointment/Acceptance

Dear Mr. Babb:

I, <u>Tony Cauchi</u> attest that I do meet or exceed the above listed qualification for the position of Medical Director and do hereby accept this appointment to perform the responsibilities of the position as described in the CAAHEP Standards and Guidelines (Standards III.B.2).

Responsibilities: The medical director must be responsible for medical oversight of the program and must:

- 1. Review and approve the educational content of the program curriculum for appropriateness, medical accuracy, and reflection of current evidence-informed prehospital or emergency care practice.
- 2. Review and approve the required minimum numbers for each of the required patient contacts and procedures listed in these standards.
- 3. Review and approve the instruments and processes used to evaluate students in didactic, laboratory, clinical, and field internship.
- 4. Review the progress of each student throughout the paramedic program, and assist in the determination of appropriate corrective measures, when necessary.
- 5. Ensure the competence of each graduate of the paramedic program in the cognitive, psychomotor, and affective domains.
- 6. Engage in cooperative involvement with the program director.
- 7. Ensure the effectiveness and quality of any Medical Director responsibilities delegated to another qualified physician.

8. Ensure educational interaction of physicians with paramedic students.

Signature of Appointee

Date

1 AUG 2019

Sub-Section 1.200.77 - Medical Director Curriculum Vitae

A separate document is maintained by the program director containing all curriculum vitae.

Sub-Section 1.200.88 - Medical Director Credentials

A file is maintained by the program director containing all current licenses, certifications, and credentials.

Section 1.240 - Faculty, General

Sub-Section 1.240.33 - Faculty Purpose

Provide instruction, supervision, and timely assessments of student progress in meeting program requirements. Work with advisory committee (if applicable), administration, clinical and field internship affiliates and communities of interest to enhance the program.

Sub-Section 1.240.66 - Support Personnel Purpose

Provide support personnel and services to ensure achievement of program goals and outcomes (i.e. admissions, registrar, advising, tutoring, and clerical).

Section 1.280 - Faculty, Program Director

Sub-Section 1.280.09 - Program Director Requirements

Primary faculty must have certifications on file that indicate they have the education and experience on file to be a professional educator. Examples might include, but not limited to: Over 40 hours of instructor education (Emergency Services Instructor II, EMS Instructor/Coordinator, or Teacher/Educator College Degree).

Sub-Section 1.280.18 - Program Director Minimum Qualifications

- Possess a minimum of a Bachelor's degree to direct a paramedic program and a minimum of an Associate's degree to direct an advanced emergency medical technician program from an accredited institution of higher education. Preferred to have a minimum of a Master's degree.
- Have appropriate medical or allied health education, training, and experience. Have field experience in the delivery of out-of-hospital emergency care. Have academic training and preparation related to emergency medical services at least equivalent to that of the level of program graduates. Current licensure and at least two years clinical experience in the level of program graduates.
- Be knowledgeable about methods of instruction, testing, and evaluation of students. Should be able to demonstrate knowledge gained in the following classes:
 - NFPA 1041 Professional Qualifications for Fire Department Instructor (level III).
 - OR Emergency Medical Services Instructor/Coordinator.
- Be knowledgeable about the current versions of the National EMS Scope of Practice, National EMS Education Standards, and about evidenced-informed clinical practice.
- Must have the ability to supervise and evaluate all students in the classroom and training evolutions.
- Primary faculty must also have enough education and experience in the field of the program they are managing to qualify them to instruct others. This qualification is at the discretion of the EMS Director.
- Experience as an instructor.

Sub-Section 1.280.27 - Program Director Responsibilities

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

- The administration, organization, and supervision of the educational program.
- The continuous quality review and improvement of the educational program.
- Long range planning and ongoing development of the program.
- The effectiveness of the program, including instruction and faculty, with systems in place to demonstrate the effectiveness of the program.

- Cooperative involvement with the medical director.
- The orientation, training, and supervision of clinical and field internship preceptors.

Sub-Section 1.280.36 - Program Director Description of Duties

- Identifies or develops lesson plans for programs and education events.
- Identifies or develops lesson plans.
- Organizes the learning environment so that learning is maximized.
- Develops record-keeping requirements to meet applicable licensure, state, and accreditation requirements.

Sub-Section 1.280.45 - Program Director Job Description

The official job description for the Director of the EMS Education Department can be found on the CMH Intranet at: F:\Depts\Pre-Hospital\Clinical\Professional Development\job descriptions

Sub-Section 1.280.54 - Program Director Appointment Letter

Date: February 1st, 2017

Theron Becker 1500 N Oakland Ave. Bolivar, MO 65613

Re: PD Appointment/Acceptance

Dear Mr. Becker:

Citizens Memorial Hospital is delighted to appoint Theron Becker, MMPA, EFO, BS-FPE, NRP to serve as Program Director effective February 1st, 2017.

Mr. Becker appears to meet the following Program Director qualifications as validated by their current Curriculum Vitae, State and National Registry licensing, and official transcript:

Qualifications - The Program Director must:

- 1. Possess a minimum of a Bachelor's degree.
- 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 a paramedic.
- 6. Be knowledgeable about the current versions of the National EMS Scope of Practice and National EMS Education Standards, and about evidenced-informed clinical practice.

Signature of Chief Executive Officer Date

Version 11 (8/1/19) Mission: Updated: 8/23/2019

Provide state of the cert education to develop and symposts a team of exceptional amount and professionals.

Re: PD Appointment/Acceptance

Sub-Section 1.280.63 - Program Director Acceptance Letter

Donald Babb
1500 N Oakland Ave.
Bolivar, MO 65613

Date: February 1st, 2017

Dear Mr. Babb:

I, Theron Becker attest that I do meet or exceed the above listed qualification for the position of Program Director and do hereby accept this appointment to perform the responsibilities of the position as described in the CAAHEP Standards and Guidelines (Standards III.B.1).

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 education program.
- 2. The continuous quality review and improvement of the education program.
- 3. Long-range planning and ongoing development of the program.
- 4. The effectiveness of the program, including instruction and faculty, with systems in place to demonstrate the effectiveness of the program.
- 5. Cooperative involvement with the medical director.
- 6. The orientation, training, and supervision of clinical and field internship preceptors.
- 7. The effectiveness and quality of fulfillment of responsibilities delegated to another qualified individual.

	-	
Signature of Appointee		Date

Sub-Section 1.280.72 - Program Director Curriculum Vitae

A separate document is maintained by the program director containing all curriculum vitae. Theron's full bio and curriculum vitae can be found here: http://ozarksems.com/theronresume.php.

Sub-Section 1.280.81 - Program Director Credentials

A file is maintained by the program director containing all current licenses, certifications, and credentials.

Section 1.320 - Faculty, EMT Lead Instructor

Sub-Section 1.320.12 - EMT Lead Instructor Requirements

Primary faculty must have certifications on file that indicate they have the education and experience on file to be a professional educator. Examples might include, but not limited to: Over 40 hours of instructor education (Emergency Services Instructor II, EMS Instructor/Coordinator, or Teacher/Educator College Degree).

Sub-Section 1.320.24 - EMT Lead Instructor Minimum Qualifications

- Professional healthcare credential(s) and experience in emergency medicine and prehospital care. Current licensure and at least two years clinical experience in the level of course.
- Knowledge of instructional methods. Have teaching experience to deliver content, skills instruction, and remediation. Should be able to demonstrate knowledge gained in the following classes:
 - NFPA 1041 Professional Qualifications for Fire Department Instructor (level II).
 - OR Emergency Medical Services Instructor/Coordinator.
- Must have the ability to supervise and evaluate all students in the classroom and training evolutions.
- Primary faculty must also have enough education and experience in the field of the program they are managing to qualify them to instruct others. This qualification is at the discretion of the EMS Director.
- Experience as an instructor.

Sub-Section 1.320.36 - EMT Lead Instructor Description of Duties

- Perform duties assigned under the direction and delegation of the program director.
- Delivers instruction effectively from a prepared lesson plan, including instructional aides and evaluation instruments.
- Adapts lesson plans to the unique requirements of the students.
- Organizes the learning environment so that learning is maximized.
- Meets the record-keeping requirements of the EMS Education Director.
- Assembles course materials, given a specific topic, so that the lesson plan, all materials, resources, and equipment needed to deliver the lesson are obtained.
- Operates audiovisual equipment, and demonstration devices, given a learning environment and equipment, so that the equipment functions properly.
- Utilizes audiovisual materials, given prepared topical media and equipment, so that the intended objectives are clearly presented, transitions between media and other parts of the presentation are smooth, and media is returned to storage.

- Administers oral, written, and performance tests, given the lesson plan, evaluation instruments, and the evaluation procedures of the agency, so that the testing is conducted according to procedures and the security of the materials is maintained.
- Grades student oral, written, or performance tests, given class answer sheets or skills
 checklists and appropriate answer keys, so the examinations are accurately graded and
 properly secured.
- Reports test results, given a set of test answer sheets or skills checklists, a report form and policies and procedures for reporting so that the results are accurately recorded, the forms are forwarded according to the procedure, and unusual circumstances are reported.
- Provides evaluation feedback to students, given evaluation data, so that the feedback is timely, specific enough for the student to make efforts to modify behavior, objective, clear, and relevant; include suggestions based on the data.
- May develop individual lesson plans for a specific topic including learning objectives, instructional aids, and evaluation instruments to be approved by the EMS Education Director.

Signature of Appointee

Date

Sub-Section 1.320.48 - EMT Lead Instructor Appointment / Acceptance Letter

Date: June 8th, 2018 Ryan McDonald 1500 N Oakland Ave. Bolivar, MO 65613 Re: EMT Lead Instructor Appointment/Acceptance Dear Mr. McDonald: Citizens Memorial Hospital is delighted to appoint Ryan McDonald, Paramedic to serve as EMT Lead Instructor effective August 7th, 2018. Mr. McDonald appears to meet the following EMT Lead Instructor qualifications as validated by their current Curriculum Vitae, State or National Registry licensing, and official transcript: Qualifications - The EMT Lead Instructor must possess: 1. Professional healthcare credential(s). 2. Experience in emergency medicine and prehospital care. 3. Knowledge of instructional methods. 4. Teaching experience to deliver content, skills instruction, and remediation. Signature of Director of EMS Education Date I, Ryan McDonald attest that I do meet or exceed the above listed qualification for the position of EMT Lead Instructor and do hereby accept this appointment to perform the responsibilities of the position as described in the CAAHEP Standards and Guidelines (Standards

III.B.6).

Version 11 (8/1/19) Updated: 8/23/2019 Mission:

Signature of Appointee

Date

Sub-Section 1.320.60 - EMT Lead Instructor Appointment / Acceptance Letter

	Date: June 8th, 2018	
	Bobby OKeefe 1500 N Oakland Ave. Bolivar, MO 65613 Re: EMT Lead Instructor Appointment	/Acceptance
	Dear Mr. OKeefe:	
EMT I	Citizens Memorial Hospital is delighted to appoint Bobby OKeefe, Paramedic Lead Instructor effective August 7th, 2018.	to serve as
validat transci	Mr. OKeefe appears to meet the following EMT Lead Instructor qualifications ted by their current Curriculum Vitae, State or National Registry licensing, and ript:	
	Qualifications - The EMT Lead Instructor must possess:	
	 Professional healthcare credential(s). Experience in emergency medicine and prehospital care. Knowledge of instructional methods. Teaching experience to deliver content, skills instruction, and remediation 	
	Signature of Director of EMS Education	Date
	I, Bobby OKeefe attest that I do meet or exceed the above listed qualification on of EMT Lead Instructor and do hereby accept this appointment to perform the assibilities of the position as described in the CAAHEP Standards and Guidelines (5).	e

Sub-Section 1.320.72 - EMT Lead Instructor Curriculum Vitae

A separate document is maintained by the program director containing all curriculum vitae.

Sub-Section 1.320.84 - EMT Lead Instructor Credentials

A file is maintained by the program director containing all current licenses, certifications, and credentials.

Section 1.360 - Faculty, Paramedic Lead Instructor

Sub-Section 1.360.14 - Paramedic Lead Instructor Requirements

Primary faculty must have certifications on file that indicate they have the education and experience on file to be a professional educator. Examples might include, but not limited to: Over 40 hours of instructor education (Emergency Services Instructor II, EMS Instructor/Coordinator, or Teacher/Educator College Degree).

Sub-Section 1.360.28 - Paramedic Lead Instructor Minimum Qualifications

- Must possess a minimum of an Associate's degree for paramedic lead instructor -Bachelor's degree is preferred.
- Professional healthcare credential(s) and experience in emergency medicine and prehospital care. Current licensure and at least two years clinical experience in the level of course.
- Knowledge of instructional methods. Have teaching experience to deliver content, skills instruction, and remediation. Should be able to demonstrate knowledge gained in the following classes:
 - NFPA 1041 Professional Qualifications for Fire Department Instructor (level II).
 - OR Emergency Medical Services Instructor/Coordinator.
- Must have the ability to supervise and evaluate all students in the classroom and training evolutions.
- Primary faculty must also have enough education and experience in the field of the program they are managing to qualify them to instruct others. This qualification is at the discretion of the EMS Director.
- Experience as an instructor.

Sub-Section 1.360.42 - Paramedic Lead Instructor Description of Duties

- Perform duties assigned under the direction and delegation of the program director.
- Delivers instruction effectively from a prepared lesson plan, including instructional aides and evaluation instruments.
- Adapts lesson plans to the unique requirements of the students.
- Organizes the learning environment so that learning is maximized.
- Meets the record-keeping requirements of the EMS Education Director.
- Assembles course materials, given a specific topic, so that the lesson plan, all materials, resources, and equipment needed to deliver the lesson are obtained.
- Operates audiovisual equipment, and demonstration devices, given a learning environment and equipment, so that the equipment functions properly.

- Utilizes audiovisual materials, given prepared topical media and equipment, so that the intended objectives are clearly presented, transitions between media and other parts of the presentation are smooth, and media is returned to storage.
- Administers oral, written, and performance tests, given the lesson plan, evaluation instruments, and the evaluation procedures of the agency, so that the testing is conducted according to procedures and the security of the materials is maintained.
- Grades student oral, written, or performance tests, given class answer sheets or skills
 checklists and appropriate answer keys, so the examinations are accurately graded and
 properly secured.
- Reports test results, given a set of test answer sheets or skills checklists, a report form and policies and procedures for reporting so that the results are accurately recorded, the forms are forwarded according to the procedure, and unusual circumstances are reported.
- Provides evaluation feedback to students, given evaluation data, so that the feedback is timely, specific enough for the student to make efforts to modify behavior, objective, clear, and relevant; include suggestions based on the data.
- May develop individual lesson plans for a specific topic including learning objectives, instructional aids, and evaluation instruments to be approved by the EMS Education Director.

Sub-Section 1.360.56 - Paramedic Lead Instructor Appointment / Acceptance Letter

	Date: February 1st, 2017	
	Theron Becker 1500 N Oakland Ave. Bolivar, MO 65613 Re: Paramedic Lead Instructor Appointment	t/Acceptance
	Dear Mr. Becker:	
FPE, 1	Citizens Memorial Hospital is delighted to appoint Theron Becker, MMPA, INRP to serve as Paramedic Lead Instructor effective February 1st, 2017.	EFO, BS-
valida transc	Mr. Becker appears to meet the following Paramedic Lead Instructor qualificated by their current Curriculum Vitae, State or National Registry licensing, and ript:	
	Qualifications - The Paramedic Lead Instructor must possess:	
	 A minimum of an associate degree. Professional healthcare credential(s). Experience in emergency medicine and prehospital care. Knowledge of instructional methods. Teaching experience to deliver content, skills instruction, and remediation 	n.
	Signature of Chief Executive Officer	Date
	I, Theron Becker attest that I do meet or exceed the above listed qualification on of Paramedic Lead Instructor and do hereby accept this appointment to perfessibilities of the position as described in the CAAHEP Standards and Guideline (5).	orm the
	Signature of Appointee	Date

Sub-Section 1.360.70 - Paramedic Lead Instructor Curriculum Vitae

A separate document is maintained by the program director containing all curriculum vitae. Theron's full bio an curriculum vitae can be found here: http://ozarksems.com/theronresume.php.

Sub-Section 1.360.84 - Paramedic Lead Instructor Credentials

A file is maintained by the program director containing all current licenses, certifications, and credentials.

Section 1.400 - Faculty, Field Training Officers

Field Training Officers (FTOs) serve as preceptors for students and new hires.

- Advanced FTOs are ALS-level providers and educators. Paramedic students and Paramedic new-hires are assigned shifts with ALS FTOs.
- Basic FTOs are BLS-level educators who may be BLS-level or ALS-level providers. EMT students, EMT new-hires, and job shadows are assigned shifts with BLS FTOs.

Sub-Section 1.400.19 - FTO Requirements

PREREQUISITES TO BE ELIGIBLE FOR FTO STATUS:

- CMH employee for at least one year.
- Licensed at the desired FTO level for at least two years. For example, a new paramedic can still be a BLS FTO if it has been at least two years since they got their EMT license.
- Complete required Platinum preceptor education. This education is only valid for 12 months and must be repeated for the next year.
 - o "Platinum Ed EMS Preceptor Training"
 - o "CMH EMS Ambulance Preceptor Orientation"
- Attain at least a 90% successful completion rate of the monthly protocol quizzes over the previous 12 months.
- Attain at least a 70% top box score on student satisfaction over the previous 12 months. If less than 70%, an action plan may be developed on a case-by-case basis for improvement.
- Attain at least a 70% average score on ePCR quality assurance evaluations over the previous 12 months.

FTO STATUS APPROVAL:

• After meeting all prerequisites above, the FTO applicant must be recommended by their direct supervisor. This recommendation is only valid for 12 months. This recommendation may be rescinded at any time by the direct supervisor and FTO status will be revoked.

FTO STATUS MAINTENANCE:

Annually, all FTOs shall be re-evaluated for eligibility status. Those that maintain all of the eligibility requirements must repeat the following:

- Repeat the required Platinum preceptor education.
- Direct supervisor must recommend the FTO applicant again for the next 12 months.

Sub-Section 1.400.38 - FTO Qualifications

- Eighteen years of age or older.
- Must be currently certified and licensed at least at the level of course being taught.
- Must have the ability to supervise and evaluate students in the clinical environment.
- ALS FTOs have been a Paramedic for at least two years, CMH employee for at least one year, and have been recommended by their direct supervisor.
- BLS FTOs have been an EMT for at least two years, CMH employee for at least one year, and have been recommended by their direct supervisor.

Sub-Section 1.400.57 - FTO Description of Duties

- Organizes the learning environment so that learning is maximized.
- Meets the record-keeping requirements of the EMS Education Director.
- Provides evaluation feedback to students, given evaluation data, so that the feedback is timely, specific enough for the student to make efforts to modify behavior, objective, clear, and relevant; include suggestions based on the data.

Sub-Section 1.400.76 - FTO Job Description

This document can be found on CMH Intranet at F:\Depts\Pre-Hospital\Clinical\Professional Development\job descriptions

Section 1.440 - Faculty, Guest Instructors

Sub-Section 1.440.16 - Guest Instructor Requirements

Guest instructors must also enough education and experience in the field of the course they are instructing to qualify them to instruct others. This qualification is at the discretion of the EMS Education Director. In the case where the guest instructor is not an experienced and qualified instructor, the course will be supervised by a lead instructor that meets the requirements of Primary Faculty.

Sub-Section 1.440.32 - Guest Instructor Minimum Qualifications

- Eighteen years of age or older.
- 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 topic to which they are assigned.
- Current licensure and at least two years clinical experience in the level of course.
- Should be able to demonstrate knowledge gained in the following classes:
 - NFPA 1041 Professional Qualifications for Fire Department Instructor (level I).
 - OR Emergency Medical Services Instructor/Coordinator.
- Must have the ability to supervise and evaluate all students in the classroom and training evolutions.

Sub-Section 1.440.48 - Guest Instructor Description of Duties

- Delivers instruction effectively from a prepared lesson plan, including instructional aids and evaluation instruments.
- Adapts lesson plans to the unique requirements of the students.
- Organizes the learning environment so that learning is maximized.
- Meets the record-keeping requirements of the EMS Education Director.
- Assembles course materials, given a specific topic, so that the lesson plan, all materials, resources, and equipment needed to deliver the lesson are obtained.
- Operates audiovisual equipment, and demonstration devices, given a learning environment and equipment, so that the equipment functions properly.
- Utilizes audiovisual materials, given prepared topical media and equipment, so that the intended objectives are clearly presented, transitions between media and other parts of the presentation are smooth, and media is returned to storage.
- Administers oral, written, and performance tests, given the lesson plan, evaluation instruments, and the evaluation procedures of the agency, so that the testing is conducted according to procedures and the security of the materials is maintained.

- Grades student oral, written, or performance tests, given class answer sheets or skills
 checklists and appropriate answer keys, so the examinations are accurately graded and
 properly secured.
- Reports test results, given a set of test answer sheets or skills checklists, a report form
 and policies and procedures for reporting so that the results are accurately recorded,
 the forms are forwarded according to the procedure, and unusual circumstances are
 reported.
- Provides evaluation feedback to students, given evaluation data, so that the feedback is timely, specific enough for the student to make efforts to modify behavior, objective, clear, and relevant; include suggestions based on the data.
- May develop individual lesson plans for a specific topic including learning objectives, instructional aids, and evaluation instruments to be approved by the EMS Education Director.

<u>Sub-Section 1.440.64 - Guest Instructor Curriculum Vitae</u>

A separate document is maintained by the program director containing all curriculum vitae.

<u>Sub-Section 1.440.80 - Guest Instructor Access to Curriculum</u>

Guest instructor accounts have been created on the online platforms where curriculums are utilized for various academies:

http://jblearning.com

• User: guest.instructor@ozarksems.com

• Pass: guest.instructor

Section 1.480 - EMS Education Advisory Board

Sub-Section 1.480.33 - Advisory Board Standard Meeting Agenda

The advisory board usually meets once per trimester (three times per year) at 7 A.M. at CMH EMS Headquarters.

- Review of Advisory Board Purpose and Responsibilities.
- Previous meeting minutes approval.
- Previous trimester's accomplishments.
 - Presentation of graphs.
 - New training equipment.
 - Academy reports:
 - Outcome data
 - Graduate surveys
 - Employer surveys
 - Resource assessment matrix
 - Instructor evaluations
 - Faculty surveys
- Review and approve (if changed):
 - Accreditation status
 - Program goals
 - Minimum requirements
 - Instructor/Preceptor changes
 - Clinical affiliation changes
 - Faculty development
 - Action plans for improvement
- Projected accomplishments for next trimester.
 - Community / first responder education.
 - CMH EMS employee education.
 - EMT Academy.
 - Paramedic Academy.
- Long range planning discussion
- Open discussion and questions from the board.
- Next meeting date/time.

Meeting date:	<u> </u>	
Program Director signature:		
Medical Director signature:		

Sub-Section 1.480.66 - Advisory Board Members

Check if they are present:

Category	Title	Name	Email	
EMS Employers	CMH EMS Director	Neal Taylor	neal.taylor@citizensmemorial.com;	
Facilitator	Program Director	Theron Becker	theron.becker@citizensmemorial.com;	
Governmental Officials	EMA Director	Robert Dickson	emadirector@polkcountymo.org;	
	CMH Chief Nursing Officer	Sarah Hanak	sarah.hanak@citizensmemorial.com;	
Hospital Administration	CMH ER Director	Steffanie Haertling	steffanie.haertling@citizensmemorial.com;	
	CMH ER Education Coordinator	Alicia Zacher	alicia.zacher@citizensmemorial.com;	
Paramedic Students -	CMH Paramedic Student	Albert Sherrer	ajsherrer44@gmail.com;	
Current	CMH Paramedic Student	Dawn Sloan	dawn.sloan@citizensmemorial.com;	
Paramedic Students -	Jackson County Paramedic Graduate	Allison Young	anyoung5@gmail.com;	
Recently Graduated	Mercy Paramedic Graduate	Brice Flynn	brice.flynn@citizensmemorial.com;	
Physicians	CMH Medical Director	Dr. Tony Cauchi	tony@triadphysiciansolutions.com;	
Police and Fire Services	Bolivar Fire Interim Chief	Brent Watkins	bwatkins@bolivar.mo.us;	
Public		Kermit Hargis	pocoe@windstream.net;	
Sponsor	BTC President	Charlotte Gray	cgray@texascountytech.edu;	
Administration	SBU Provost	Dr. Lee Skinkle	lskinkle@sbuniv.edu;	

Section 1.520 - Physical Facilities

Sub-Section 1.520.33 - Classroom Descriptions

EMS Classrooms - Bolivar: Available for use are two classrooms at EMS Headquarters in Bolivar. Classroom A has computer equipment, overhead projector, dry erase boards, and desks and chairs for approximately 20 students. Classroom B has computer equipment, dry erase boards, and desks and chairs for approximately 20 students. All classrooms and facilities are wheelchair user accessible.

EMS Classrooms - Stockton: Available for use is one classroom at the EMS station in Stockton. This classroom has desks and chairs for approximately 20 students. The classroom is wheelchair user accessible.

<u>CMH Community Rooms - Bolivar</u>: Available for use are three community rooms in the Hospital, three education rooms in the Douglas Building, and two education rooms in the Nursing College Building. Each has overhead projectors, sound system, and tables and chairs for approximately 30-50 students. The three community rooms in the Hospital and the three in the Douglas Building may be joined into one large room for approximately 200 students. Adjacent to the community rooms in the Hospital is a kitchen with the availability of refreshments and food. All community rooms and facilities are wheelchair accessible.

<u>BTC Classrooms - Bolivar</u>: Informal agreements also exist with Bolivar Technical College (classroom for approximately 50 and simulation lab), Polk County Central Dispatch (classroom for approximately 20), and Bolivar City Fire Department (BCFD) (classroom for approximately 30) for the use of their facilities.

Sub-Section 1.520.66 - Available Equipment and Supplies

To provide a variety of equipment and supplies to prepare students for clinical and field internship experiences and to support student learning and faculty instruction. All equipment is maintained in proper working order by instructors before and after each class.

EQUIPMENT DEDICATED TO EMS EDUCATION

The following resources are available to all CMH employees, students of CMH EMS programs, and emergency responders within CMH's service area.

Simulation Ambulance: A fully-functional retired ambulance has been converted for use by the EMS Education Department. The ambulance is equipped with wireless audio and video feeds to allow instructors to observe students without distraction. Expired and replacement equipment and supplies from the EMS service keeps this training ambulance fully stocked for students to simulate any type of medical or trauma emergency.

High-Fidelity Manikin: A Laerdal Nursing Anne manikin is dedicated to the EMS Education Department for scenario-based training. This manikin features the ability to place an advanced or emergency airway, start IVs and IOs, and may be configured in either gender. This manikin has been upgraded with the SimPad Plus device to remotely control and simulate patient scenarios. From a wireless position, an instructor can control vitals, activate speech interactions, and recording of the simulation for playback or saving.

Training Library: A library of more than 700 reference books are available to all students. The majority of these books are EMS-oriented, but several fire service, law enforcement, management, and general healthcare topics are included. The library can be browsed and materials checked out by visiting https://ozarksems.com/library.php.

Other Equipment:

- Projectors, Data (4)
- Numerous expired and otherwise out of service equipment and supplies
- Android tablet devices for students (12)

EQUIPMENT DEDICATED TO TRAINING (NOT DEDICATED TO EMS)

- High-fidelity manikins (various ages) and simulation labs
- ACLS training equipment (setup for 15 students)
- CPR training equipment (setup for 30 students)
- ITLS training equipment (setup for 15 students)
- Manikin, Airway (2)
- Manikin, Anatomical (2)
- Manikin, CPR, Adult (10)
- Manikin, CPR, Infant (10)
- Manikin, CPR, Pediatric (10)
- Manikin, OB (1)
- PALS training equipment (setup for 15 students)
- Projectors, Data (multiple)
- Training library of medical subjects

EQUIPMENT AVAILABLE (NOT DEDICATED TO TRAINING)

- Computers, Laptop (15)
- Fully equipped ALS ambulances (15)
- Fully stocked ALS supply rooms (5)

Section 1.560 - Program Evaluations

Sub-Section 1.560.16 - Student Evaluations

Each course administered shall have a written record of student performance. This record may include, but not limited to written tests, practical skill evaluations, or other written evidence of test or exam. Individual records such as tests and skill sheets shall be maintained as a hard-copy or electronic copy in the student's file at EMS Headquarters. Class rosters shall be scanned in or otherwise electronically maintained on CMH's file server network. Student transcripts shall be maintained electronically and be available to students upon request from the CMH file server network.

Copies of completed evaluations will be maintained in student records at CMH Headquarters. Students may request a copy or to review their file or any portion thereof at any time and will be granted access within three business days.

Reasonable accommodations will be made for individuals with disabilities at their request.

WRITTEN AND ELECTRONIC TESTS (COGNITIVE ASSESSMENTS)

Definitions:

- Quiz Normally no point value. Student self-assessments.
- Test Lowest point value for chapter or similar assessments.
- Exam Medium point value for module or similar assessments. Usually twice the point value of a test.
- Final Exam Highest point value for cumulative assessments. Usually twice the point value of an exam.

Written exams will be developed by the administrative agency (i.e. American Heart Association, International Trauma Life Support, etc.) or developed by the instructor to evaluate established lesson objectives.

All tests shall be at least partially comprehensive in nature. For example, EMR, EMT, and Paramedic Academies have a test after each chapter lecture. Each Academy chapter test will contain a few questions from all previous chapters covered.

High-value written tests (i.e. trimester final exams) will be discussed, reviewed, and/or approved by the medical director as needed. These high-value written testing instruments will be evaluated for poorly written questions. The process to evaluate test questions shall be, but not limited to:

• If the testing tool does NOT have Discrimination and Point-Biserial evaluation tools: Each question is given a difficulty score (percentage of correct answers). The ideal difficulty score for a four-response multiple-choice question is 74. Difficulty scores

- significantly higher than 74 will be assessed to make them more difficult. Difficulty scores significantly lower than 74 will be assessed to make them easier.
- If the testing tool DOES have Discrimination and Point-Biserial evaluation tools: Each question that has a negative score for National Discrimination, Class Discrimination, and Point-Biserial will be reviewed.

<u>Practical Tests (Psychomotor Assessments):</u> Practical skill evaluations will be developed by the administrative agency (i.e. American Heart Association, International Trauma Life Support, etc.) or developed by the instructor to evaluate established lesson objectives. All practical tests will be reviewed and approved by the medical director as needed.

<u>Behavioral Tests (Affective Assessments)</u>: Professional behavior evaluations will be developed by the program director to evaluate the student's conduct and motivations in both the classroom and during clinicals. These evaluations may be imbedded in other assessment tools or stand-alone instruments.

• Student Behavior Evaluation Form: http://ozarksems.com/eval-behavior.php

<u>Clinical Evaluations</u>: Students performing clinical rotations will be evaluated using an online form. Students will not receive credit for attending clinicals until the evaluation by their preceptor is completed. Students must present their preceptor a link to the evaluation form.

- Clinical Student Evaluation Form: http://ozarksems.com/eval-clinical.php
- Clinical Student Field Internship Team Lead Evaluation Form: http://ozarksems.com/eval-clinical-team-lead.php
- Clinical Student Field Internship Mentor Final Evaluation Form: http://ozarksems.com/eval-clinical-mentor-final.php
- Refer to specific course syllabi for evaluation cards carried by students and given to preceptors with the links above for evaluations.

Sub-Section 1.560.32 - Instructor and Course Evaluations

Instructor and course evaluations are mailed to students after the completion of each course. These evaluations must be completed prior to the students being able to download their certificate for the course.

• Instructor and Course Evaluation Form: http://ozarksems.com/eval-course.php

Sub-Section 1.560.48 - Program Resource Survey Completed by Students

At the end of each trimester, this survey is sent to the applicable students for the purpose of evaluating our program resources. The data from the survey is evaluated at advisory meetings and will aid the program in ongoing program improvement.

• Student Program Resource Survey Form: http://ozarksems.com/eval-resource-student.php

Sub-Section 1.560.64 - Program Resource Survey Completed by Program Personnel

At the end of each trimester, this survey is sent to the applicable guest instructors, preceptors, instructors, medical director, advisory committee members, and other program personnel for the purpose of evaluating our program resources. The data from the survey is evaluated at advisory meetings and will aid the program in ongoing planning, appropriate change, and development of action plans to address deficiencies.

Program Personnel Resource Survey Form: http://ozarksems.com/eval-resource-program.php

Sub-Section 1.560.80 - Employer Survey

At the end of each trimester, this survey is sent to employers of EMT and Paramedic Academy graduates.

• Employer Survey Form: http://ozarksems.com/eval-employer.php

Section 1.600 - Satellite Programs

Currently, no satellite programs exist.

Section 1.640 - Use of Accreditation Numbers

Accreditation Numbers will only be used on completion certificates, correspondence with Accreditation entities, and site/program identification purposes. Examples include, but not limited to:

- Missouri Bureau of EMS (BEMS)
- CAAHEP
- CoAEMSP
- VA
- NAEMT

Section 1.680 - Course and Student Records

All student and course records are kept in an electronic student file on CMH's file server and are available to the student to review upon request.

Student transcripts are maintained as each course completion certificate is completed. A transcript is given to each student with each certificate. Transcripts are maintained indefinitely in an electronic format on the CMH file server network.

Section 1.720 - Academy Statistics

Refer to http://ozarksems.com for course completion rates, certification pass rates, and employment placement rates for all Academies.

Section 1.760 - Training Roster Form

Course start date:																					
Course start time:																					
	Cour	se n	ame	:																	
	You	last	nan	ne:								1			_						
,	You	· firs	t naı	ne:																	
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,	You	em	ail a	ddre	ss (t	his i	s wł	iere	you	r co	mple	etion	cert	tifica	ate w	ill b	e se	nt):			
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If issue	eu a	iexic	юок	(s), (ente	rune	bar	code	nui	пое	r(s)	nere				Ļ		4	_	_	
manua	The complete CMH EMS Education Manual is available online for your reference at http://ozarksems.com/cmh-ems-education-manual.pdf . The student manual and policies along with each course syllabus are contained in this manual.																				

Version 11 (8/1/19) <u>Mission</u>: Updated: 8/23/2019

Your signature:

Section 1.800 - Sample Certificate of Completion

After successful completion of each course, each student will receive a certificate similar to below which also includes a transcript of courses completed to date.

Citizens Memorial Hospital - Emergency Medical Services - Certificate of Completion

Theron Becker

Has successfully completed

Prehospital Trauma Life Support

Meeting the objectives and lesson requirements established by:

National Association of Emergency Medical Technicians

Trauma

Missouri BEMS Module Category

June 12, 2019

Completion Date

12.00 Classroom/Lab Contact Hours 0.00 Clinical Contact Hours

Ollege Credit

100% (Passed with A+)

Score (Grade)

Bolivar, MO

Location

Becker, Theron

Lead Instructor

theron Becker



CMH EMS Accreditations:

Missouri Bureau of EMS licensed paramedic-level training entity. BEMS #: 16706P
National Association of EMTs authorized training center. NAEMT Site ID: 7119
Department of Veterans Affairs approved course provider. Facility Code: 15610625
Committee on Accreditation of EMS Programs Letter of Review. CoAEMSP#: 600874



Part 2 - Student Manual

This policy manual will be made available to all students in all courses taught.

The current class schedule and calendar are available at http://ozarksems.com. This calendar is subject to change without notice. Changes to ongoing courses will be announced to the affected students.

Section 2.040 - Admission Criteria

Some exceptions may apply. Please contact the EMS Education Director with specific questions.

- 1. Complete Registration Form. http://ozarksems.com/education-application.php
- 2. Applicant shall be at least 18 years of age at the completion of EMS and rescue courses and before any clinical time. Fourteen years of age is acceptable for community courses.
- 3. Applicant must have a High School Diploma or GED prior to graduation from EMS courses.
- 4. Applicant must have a current Missouri Drivers License for EMS and rescue courses.
- 5. Space may be limited and could be on a first-come, first-serve basis. A point system could be utilized for student selection and include such criteria as CMH employment status, answers to questions on the registration form, residency within EMS response area, and score on an entrance exam. Further considerations may be at the discretion of the EMS Education Director.
- 6. Applicants may be required to attend an interview with the EMS Education Director, and/or Lead Instructor.
- 7. Applicants may be required to successfully complete an entrance exam.
- 8. Students performing skills or clinical time on actual patients will be required to obtain a student ID at CMH Human Resources Department. HR department will conduct a criminal background check to ensure no felonies and no drug convictions before issuing ID.

Students who require special assistance should contact the EMS Education Director and/or Lead Instructor as soon as possible. All efforts will be made to accommodate the special needs of students.

Section 2.080 - Fair Practices

According to CAAHEP Standard V.A.2, at least the following must be made known to all applicants and students. Refer to Program Syllabi for details on each of these requirements. Contact the EMS Education Director and/or Lead Instructor for more information.

Requirement	Section	Page
The sponsor's institutional and	Sub-Section 3.490.04 - Paramedic Academy	136
programmatic accreditation status as	Accreditation	
well as the name, mailing address,		
website address, and phone number of		
the accrediting agencies.		
Admission policies and practices.	Sub-Section 3.350.36 - EMT Academy	117
	Application and Selection Process	
	Sub-Section 3.490.20 - Paramedic Academy	148
	Application and Selection Process	
Policies on advanced placement.	Sub-Section 3.490.24 - Paramedic Academy	149
	Military Advanced Placement	
	Sub-Section 3.490.26 - Paramedic Academy	151
	Registered Nurse Advanced Placement	
Policies on transfer of credits.	Sub-Section 3.490.30 - Paramedic Academy	152
	Anatomy and Physiology Transfer Credit	
Policies on credits for experiential	Sub-Section 3.350.40 - EMT Academy	117
learning.	Experiential Learning	
	Sub-Section 3.490.22 - Paramedic Academy	148
	Experiential Learning	
Number of credits required for	Sub-Section 3.350.64 - EMT Academy	120
completion of the program.	Examination and Graduation Requirements	
	Sub-Section 3.490.44 - Paramedic Academy	161
	Examination and Graduation Requirements	
Tuition/fees and other costs required to	Section 2.160 - Course Fees	68
complete the program.	Sub-Section 3.350.28 - EMT Academy	114
	Tuition Details	
	Sub-Section 3.490.16 - Paramedic Academy	143
	Tuition Details	
Policies and processes for withdrawal.	Section 2.240 - Student Withdrawal Policy	71
Policies for refunds of tuition/fees.	Section 2.200 - Refund Policy	70

Section 2.120 - Non-Discrimination

CMH makes all decisions regarding student recruitment, selection, retention, and grading practices without discrimination on grounds of race, color, creed, religion, sex, sexual orientation, ancestry, national origin, age, genetic marker, disability, or any other characteristic which lawfully cannot be the basis for an employment decision by state, local, or federal law.

CMH affirms a policy of equal employment opportunity and nondiscrimination in the provision of education services to the public. CMH makes all decisions regarding recruitment, hiring, promotion, and all other terms and conditions of employment without discrimination on the grounds of race, color, creed, religion, sex, sexual orientation, ancestry, national origin, age, genetic marker, disability, or any other characteristic which lawfully cannot be the basis for an employement by state, local, or federal law.

CMH EMS Education Department is obligated by and adheres to the provisions of:

- Section 493A, Title IV, Higher Education Act of 1965 as amended.
- Title 38, United States Code, Veteran's Benefits.
- Title IX, Education Amendments of 1972.
- Section 504, Rehabilitation Act of 1973.
- Family Education Rights and Privacy Act of 1974 as amended.
- Drug-Free Schools and Communities Act Ammendments of 1989.

Inquiries concerning the application of these laws and their implementing regulations may be referred to the CMH EMS Education Director.

CMH EMS Education Department complies with Section 504 of the Rehabilitiation Act of 1973 and makes every effort to ensure that disabled persons admitted as students or employed by the college are afforded all of the rights and privileges provided to them by this state and federal laws. CMH EMS Education Department is committed to providing a sound learning environment to academically qualified students with disabilities. Students must provide complete current documentation to the EMS Education Director prior to beginning a program, and accommodations will be determined based on documentation, then communicated to the instructor with consent of the student.

Section 2.160 - Course Fees

Course fees will be established and published with course announcements. At a minimum, 50% of course fees will be due by the first day of class. Volunteer fire and rescue members that have primary or mutual aid responsibilities in CMH EMS districts or to CMH facilities qualify for the "volunteer" discounts below. Career employees working for agencies with primary or mutual aid responsibilities in CMH EMS districts or to CMH facilities qualify for the "partner" discounts below.

Course Na	me	Application	Tuition (in addition to application fee)					
		Fee	Regular	Partner	Volunteer	CMH		
Academy	EMR (student-supplied book)	\$0	\$0	\$0	\$0	NA		
	EMR (CMH-supplied book)	\$10	\$120	\$120	\$120	NA		
	EMT	\$50	\$750 (see details)	e EMT Ac	cademy sylla	bus for		
	Paramedic	\$100	\$7,500 (s for detail		edic Acaden	ny syllabus		
Course Na	me	Application	Tuition (in additio	n to applicati	ion fee)		
		Fee		Partner	Volunteer	CMH, Cox, or Ellett		
NAEMT	AHDR	\$10	\$70	\$60	\$50	\$50		
	GEMS	\$20	\$140	\$110	\$90	\$90		
	LEFR-TCC	\$10	\$70	\$60	\$50	\$50		
	PHTLS	\$20 (CMH: \$0)	\$140	\$110	\$90	\$0		
	PHTLS Refresher	\$10 (CMH: \$0)	\$70	\$60	\$50	\$0		
	PTEP	\$10	\$70	\$60	\$50	\$50		
	Safety Seminar (Safety, TIMS, & EVOS)	\$20	\$70	\$60	\$50	\$0		
	TCCC	\$30	\$280	\$210	\$160	\$160		
	TECC	\$20 (CMH: \$0)	\$140	\$110	\$90	\$0		
	TFR	\$10	\$70	\$60	\$50	\$50		
Other	EMS Instructor	\$40	\$340	\$260	\$200	\$200		
	Hazmat Medic	\$10	\$70	\$60	\$50	\$50		
Refresher	EMT	\$20 (CMH: \$0)	\$170	\$130	\$100	\$0		
	Paramedic	\$40 (CMH: \$0)	\$340	\$260	\$200	\$0		

Academy application fees and all non-academy tuition are paid to EMS Education and a receipt is provided at that time. Those funds are sent to Felicia Jump in admin to be credited to department 01.01.9035.

Sub-Section 2.160.50 - VA Delayed Payment Compliance

CMH will not impose any penalty, including the assessment of late fees, the denial of access to classes, libraries or other institutional facilities, or the requirement that a student borrow additional funds to cover the student's inability to meet his or her financial obligations to the institution due to the delayed disbursement of a payment by the US Department of Veterans Affairs.

In other words, once the paperwork is submitted to VA, we consider course fees paid even though it may be some time later that a check is actually submitted by the VA.

Section 2.200 - Refund Policy

All refund requests must be made in writing or email to the lead instructor or department director. In the case of any refund, all course materials shall be returned by the student in good working order and able to be issued to another student.

Sub-Section 2.200.24 - Veterans Affairs Refund Policy

If a student is utilizing funding from Department of Veterans Affairs, this section applies. In essence, a refund will be made using the following formula:

$$R = (A + T - U - \$10) \times (P)$$

- R = Amount of Refund
- A = Application Fee
- T = Tuition
- U = Portion of application fee or tuition already used to purchase books, uniforms, etc.
- P = (Days remaining in course) / (Total days in course)

A refund of the unused portion of tuition, fees, and other charges will be made to veterans or eligible persons who fail to enter or fail to complete the course as required by Department of Veterans Affairs Regulations, CFR 21.4255. The refund will be within 10 percent of an exact pro rata refund. No more than \$10 of the established registration fee will be retained if a veteran or eligible person fails to enter the course. Prompt Refund: The refunded amount shall be paid within 40 days.

Sub-Section 2.200.48 - Application Fee Refund Policy

Academy application fees are non-refundable. For all other courses, a full application fee refund will be made up to two weeks before the start date of the course. After that point and before the start date and time of the class, reimbursement will be refunded at 50%. No application fees will be returned after the start date and time of class.

Sub-Section 2.200.72 - Tuition Refund Policy

Refer to each Academy syllabi for specific tuition details. For all other courses, the deadline for tuition payment is the start date and time of the class. A full tuition fee refund will be made before the deadline. No tuition fees will be returned after the deadline.

Section 2.240 - Student Withdrawal Policy

The student shall submit in writing with date and signature a request to withdrawal to the lead instructor. An exit interview shall be conducted with the program director.

Section 2.280 - Attendance Policy

Any time a student must be absent from class, the EMS Education Director or Instructor should be contacted. Due to the compact time frame of most courses, it is important that all classes are attended. Students must attend 80% of required course activities, including classroom and laboratory hours. More than 20% absence rate may be the reason for dismissal.

Any student who is absent is responsible for any and all information, materials, and instructions given during class. The student will be held responsible for material presented and for assignments in the missed class. All missed clinical hours must be made up. Time made up for clinical rotations does not decrease the total number of hours missed. Faculty are under no obligation to offer extraordinary assistance to students who are chronically absent or tardy.

Sub-Section 2.280.19 - Medical Absences

Doctor's visits and other appointments should be scheduled beyond school hours. Any absence of three consecutive days or longer due to illness will require a doctor's written statement. Illness verification by a doctor may also be required at any time as deemed necessary by the EMS Education Director. Any hospitalization requires a release from the doctor to return to class and clinicals. Extenuating circumstances will be considered on a case-by-case basis. Documentation for extenuating circumstances must be submitted within seven calendar days of return to class.

Students will not be allowed to attend class or clinical rotations if any of the following health issues is present:

- Elevated temperature of 100.4 degrees Fahrenheit or above.
- Vomiting or diarrhea.
- Cognitive deficits.
- Signs or symptoms of communicable disease (i.e. pink eye, cold, flu, streptococcus, etc.)

Sub-Section 2.280.38 - Tardiness

Students should realize that tardiness to class is very disruptive and that disciplinary measures may be taken for tardiness. If a student arrives to class after it has started must wait until the next break to enter to avoid causing a disturbance. Any student who is tardy more than 20% of the total contact time for that class will marked absent for the entire activity. For example, a student may not be more than 48 minutes late to a class that is to meet from 1800 hours to 2200 hours. Habitual tardiness of any period of time may be handled on a case-by-case basis to eliminate the disruption.

Sub-Section 2.280.57 - Visitors

Children and visitors are not allowed during classroom, laboratory, or skills activities except by explicit invitation by instructor, lead instructor, program director, or EMS Education Director. Instructor, lead instructor, program director, and EMS Education Director must approve all visitors on a case-by-case basis.

Sub-Section 2.280.76 - Interruptions

Students are not permitted to leave early or interrupt class with pagers, cell phones, or radios. Students should turn them off, silence them, or not bring them into the classroom. Onduty students may, at the instructor's discretion, be allowed to respond to emergencies during class at the request of the Incident Commander.

Students are expected to display courteous and professional behavior during classroom, lab, and clinical sessions. Disruptive behavior during a lecture, practical, or clinical session may be grounds for dismissal.

Section 2.320 - Dress Code

During class time, clinical rotations, or lab time, students should wear dark navy or black pants (EMT-style pants preferred), black belt, black shoes (safety boots preferred), and the issued polo-style shirt. If a polo shirt has not been issued for the class, an appropriate blank, collared shirt may be worn as long as it does not indicate the student is an employee of CMH or other organization and cannot be disruptive.

Violations of the following dress code and behavior code may be grounds for the EMS Education Director or Instructor to mark the student as absent, excuse the student from the activity, and/or dismiss the student from the program.

Students not wearing the proper uniform will be sent home. Any time patient contact is made, participants with long hair should keep it pulled back; nails should be kept short; and perfume, cologne, and jewelry should be kept to a minimum. All jewelry and tattoos must adhere to CMH policies (Dress code policy HR 03-05 states personal hygiene must be maintained and any jewelry other than small stud earrings must be removed or covered. Additionally, all tattoos must be covered and beards cannot be longer than two inches.)

Sub-Section 2.320.24 - Student Employees

Students that are also employees must not wear employee uniforms or other apparel that might identify them as a non-student while performing as a student in the classroom or clinical rotations.

Sub-Section 2.320.48 - Student Uniforms Outside Class

Student uniforms may not be worn outside class activities, except during travel to or travel from a class activity. The intent of this rule is to prohibit students representing CMH while doing non-class sanctioned activities. Incidental stops before and after class activities are acceptable as long as they are within social norms and will not reflect poorly on CMH.

Sub-Section 2.320.72 - Polo Shirt Style Details

The preferred student uniform polo shirt will be Propper ICE Performance Polo Shirt.

- Men's Galls style number: ST136
 - https://www.galls.com/propper-i-c-e-performance-polo-shirt?PMSRCH=ST136
- Women's Galls style number: ST284
 - https://www.galls.com/propper-ice-short-sleeve-women-s-polo-shirt?PMSRCH=st284
- Galls contact is Robert Knowles (859-800-1335) knowles-robert@galls.com

EMR Academy students shall wear SILVER TAN EMT Academy students shall wear HI VIZ YELLOW AEMT Academy students shall wear GRAY Paramedic Academy students shall wear RED No image available Critical Care Paramedic Academy students shall wear No image COBALT available Community Paramedic Academy students shall wear DARK GREEN Instructors are issued and encouraged to wear DARK **NAVY**

Section 2.360 - Class Cancellation Policy

In the event of course cancellation, for any reason, registrants will be notified immediately, and course fees will be refunded when all course materials are returned. In the event of poor weather, courses will be cancelled at the discretion of the Lead Instructor. In the event that a class is cancelled, that class will be rescheduled, and students should prepare for the next class already on the schedule.

In the event of cancellation, students will be contacted via text message and email. If students believe road conditions are unsafe near their home, they are responsible for contacting the instructor.

Section 2.400 - Academic Integrity

Academic integrity is vital to the success of the student and the educational program. Quality education leads to quality care. The highest standards of ethical and professional conduct are integral to success in the EMS education. As members of the EMS profession, the student shares a commitment to adhere to the EMS Code of Ethics found at http://www.naemt.org/aboutems/emt-oath:

Professional status as an Emergency Medical Services (EMS) Practitioner is maintained and enriched by the willingness of the individual practitioner to accept and fulfill obligations to society, other medical professionals, and the EMS profession. As an EMS practitioner, I solemnly pledge myself to the following code of professional ethics:

- To conserve life, alleviate suffering, promote health, do no harm, and encourage the quality and equal availability of emergency medical care.
- To provide services based on human need, with compassion and respect for human dignity, unrestricted by consideration of nationality, race, creed, color, or status; to not judge the merits of the patient's request for service, nor allow the patient's socioeconomic status to influence our demeanor or the care that we provide.
- To not use professional knowledge and skills in any enterprise detrimental to the public well being.
- To respect and hold in confidence all information of a confidential nature obtained in the course of professional service unless required by law to divulge such information.
- To use social media in a responsible and professional manner that does not discredit, dishonor, or embarrass an EMS organization, co-workers, other health care practitioners, patients, individuals or the community at large.
- To maintain professional competence, always striving for clinical excellence in the delivery of patient care.
- To assume responsibility for upholding standards of professional practice and education.
- To assume responsibility for individual professional actions and judgment, both in dependent and independent emergency functions, and to know and uphold the laws which affect the practice of EMS.
- To be aware of and participate in matters of legislation and regulation affecting EMS.
- To work cooperatively with EMS associates and other allied healthcare professionals in the best interest of our patients.
- To refuse participation in unethical procedures, and assume the responsibility to expose incompetence or unethical conduct of others to the appropriate authority in a proper and professional manner.

Section 2.440 - Student Dismissal

Any violation of the medical ethics for patient care and patient confidentiality will result in a meeting with the Medical Director, Pre-Hospital Director, EMS Education Director, and/or Lead Instructor. The meeting will determine the proper course of discipline or dismissal. Students dismissed from a course may not re-enter the same course and must re-apply to the next course if they choose.

Sub-Section 2.440.24 - Infractions List

Infractions which may result in disciplinary action or dismissal from the class are:

- Violation of the EMS Code of Ethics;
- Dishonesty; Cheating in any form;
- Illegal use of controlled substances; Behavior indicating drug or alcohol abuse;
- Vulgarity or derogatory language;
- Harassment of instructors or fellow students;
- Inappropriate attire is worn for clinical times or field internship or wearing a name tag other than to class, clinical times, or field internship;
- Breech of patient confidentiality, giving out information, or copying trip sheets;
- Falsification of any information on student application, records, or evaluations;
- Violations of absence/tardiness policies;
- Failure to meet the minimum scholastic, clinical, or field internship requirements as listed in the policies;
- Unexcused absence from clinicals; Inadequate preparation for clinicals;
- Theft of any property;
- Unprofessional conduct;
- Unsafe paramedic practices: Behavior that conflicts with that of a reasonably prudent licensed paramedic and has the potential to cause physical or emotional harm. Examples include failure to follow infection control procedures, failure to follow safety policies, or failure to follow treatment protocols.

Sub-Section 2.440.48 - Academic Dishonesty

Academic dishonesty is defined as a student providing or obtaining unauthorized help in academic coursework or accepting recognition for work which is not theirs. Examples of dishonesty include, but not limited to:

- Copying from another student or allowing another student to copy work.
- Unauthorized collaboration with others on tests, quizzes, or assignments.
- Using unauthorized resources (i.e. notes or cheat sheets).
- Transmitting or receiving unauthorized communications (i.e. notes or text messages) during an exam.
- Disclosing or receiving examination questions to other students.
- Using another person's ideas, opinions, or theory without acknowledgement of the source.

Sub-Section 2.440.72 - Social Media

Positive statements on social media regarding your experience at CMH and your clinical locations are encouraged and appreciated. If your social media profile associates you with CMH, all of your social posts shall be positive and professional, regardless of the topic.

Section 2.480 - Appeal and Grievance Procedure

CMH EMS Education Department is responsible for managing and resolving all disputes, complaints, or problems that arise from a course offered by an instructor representing CMH. The EMS Education Director and Instructors are responsible for day-to-day operations of training programs. They will become involved in resolving any disputes, complaints, or problems arising from courses taught by CMH EMS.

Once a student has been dismissed for any of the reasons listed, he/she may seek reinstatement through a personal interview with the Medical Director, Pre-Hospital Director, and/or EMS Education Director. If all agree, the student may return for a probationary period to be determined in that meeting. After that probation, the student will be reevaluated and may be fully reinstated, dismissed, or the probationary period extended.

A line of authority shall be followed when a grievance occurs. If there are any problems, students should contact their instructor. If the problem is not resolved or the problem is with the instructor, they should contact the EMS Education Director. If the problem is still not resolved, they should contact the EMS Director. If the grievance is not resolved, the student can request an appeal with a committee comprised of EMS management, human resources, and the hospital chief operating officer.

Request for appeal must be filed in writing to the program manager with a date and signature within five (5) business days.

Section 2.520 - Academic Criteria: Grading and Examination Policies

Students may be assigned homework during the course. Homework may consist of essay papers, reading assignments, take-home quizzes, practical evolutions, etc. Assignments must be turned in by the due date. Late work will not be accepted. Students will not be allowed to take a quiz, test, or exam early for any reason.

The grade for each course is determined by attendance, quizzes, written exams, practical exams, and/or final exams; thus reflecting mastery of the course material based on the percentage of the total points scored as being correct. For continuing education courses without exam or other grading mechanism, grades will be assessed by percentage of content the student was present for.

Grades will be determined as follows:

Grade	Percentage	Comments
A+	86.7% - 100%	
A	93.3% - 96.6%	
A-	90.0% - 93.2%	
B+	86.7% - 89.9%	
В	83.3% - 86.6%	
B-	80.0% - 83.2%	Minimum overall grade to be eligible for
		Academy certification test (i.e. NREMT)
C+	76.7% - 79.9%	
С	73.3% - 76.6%	
C-	70.0% - 73.2%	Minimum grade on any single test or significant course activity.
F	Below 70.0%	Not a passing grade. Course attendance certificate will be issued
		(not a successful course completion certificate).

Refer to specific course syllabus that will articulate the required course work, assignments, and specific requirements.

If the student misses an exam (practical or written), the student shall receive a score of zero unless the absence is excused by the EMS Education Director or Lead Instructor. Students will be allowed to retest once for each final practical station failed. Questions regarding test failure should be directed to the Lead Instructor.

All students will be under constant evaluation for the duration of the course. This will include the listed written testing as well as practical examinations. Students may have a practical check-off sheet that must be completed for course completion. The Medical Director may review all evaluations, written and practical test results, and skill performance sheets at his/her convenience.

Extra credit worksheets or quizzes may be given at any time during class. All extra credit work is voluntary. Any student wishing to complete extra credit work shall have it turned in on time.

Section 2.560 - Remedial Education

If a student performance falls below passing criteria for a chapter or unit exam (written or practical), he or she will be given the opportunity for remedial education. The student must request remediation within 24 hours to their lead instructor.

Remediation is decided on a case-by-case basis and may include, but not limited to:

- Individual tutoring,
- Extra study and/or practice session being scheduled for the entire class,
- Assignment of extra work (in the case of extra work assignment, extra work assignments will be made available to the entire class for extra credit),
- Ability to re-take the exam (in the case of re-take, the final grade will be based on an average of the two exams),
- And/or other solutions.

Section 2.600 - Health and Safety Procedures

Students shall report any dangerous environmental situations or safety hazards to their instructor, preceptor, FTO, and/or clinical educator immediately (i.e. Spills, loose wires, unsafe equipment, etc.).

When practicing skills, students should operate all equipment appropriately and properly clean all equipment.

The clinical preceptor(s), FTO(s), and clinical educator(s) have final authority over the student during rotations. Students are not permitted to operate any vehicles while on clinical rotations. Students shall always ride in a seated position and wear a seat belt while the vehicle is in motion - this includes in the patient compartment in the back of the ambulance.

If at any time the student performs actions not approved by the preceptor(s), FTO(s), or clinical educator(s), the participant may be sent home or possibly expelled from the course.

Directions given by training personnel should be followed and if not understood, the student should ask for clarification before continuing the task.

Sub-Section 2.600.33 - Clinical Exposures

While working clinical hours, students may occasionally be exposed to communicable or other medical diseases. When performing clinical rotations, students should take appropriate Body Substance Isolation (BSI) precautions. This may include (but is not limited to) gloves, eye shields, and gowns. If a student is exposed to a known case, he/she will be required to report this immediately to the instructor, preceptor, FTO, and/or clinical educator and seek necessary medical treatment.

Sub-Section 2.600.66 - Patient Protection

Any participant who has a communicable disease (common cold, flu, hepatitis, herpes or cold sore, HIV-related illness, etc.) should not participate in practical skills stations or have direct patient care/contact during the clinical setting. Students must be non-febrile for 24-hours before patient contact. Participants will be expected to attend classes (unless their condition will not permit attendance) and observe others in the practical stations. The student will be expected to practice on his/her own time to maintain skill levels.

Section 2.640 - Drug and Substance Use and Abuse

Tobacco use is not permitted during class, clinicals, labs, or while wearing student uniforms. Tobacco use is also not permitted on healthcare property, in healthcare vehicles, or during healthcare functions. Students under the influence of any illegal substance or alcohol during class will be dismissed and may be subject to further discipline or legal action. Students under the influence of even prescribed and legal substances that may impair judgment, impair reflexes, or cause drowsiness may have certain restrictions placed on them (i.e. cannot participate in laboratory, clinical, or evolutions). Illegal use of controlled substances outside of class can also lead to dismissal.

Section 2.680 - Certification Requirements

To be eligible for National Registry testing, students must have a course grade of at least 80%. The practical exam may be taken up to three times to achieve a passing score. Once the practical exam is passed, the student will be able to take the written exam. Each student will be given a National Registry Certification Requirement Brochure at the beginning of each applicable course.

To be eligible for NREMT testing, the student must pass all practical exams by successfully completing all applicable skill checks for the level of licensure currently available on NREMT's website (http://www.nremt.org).

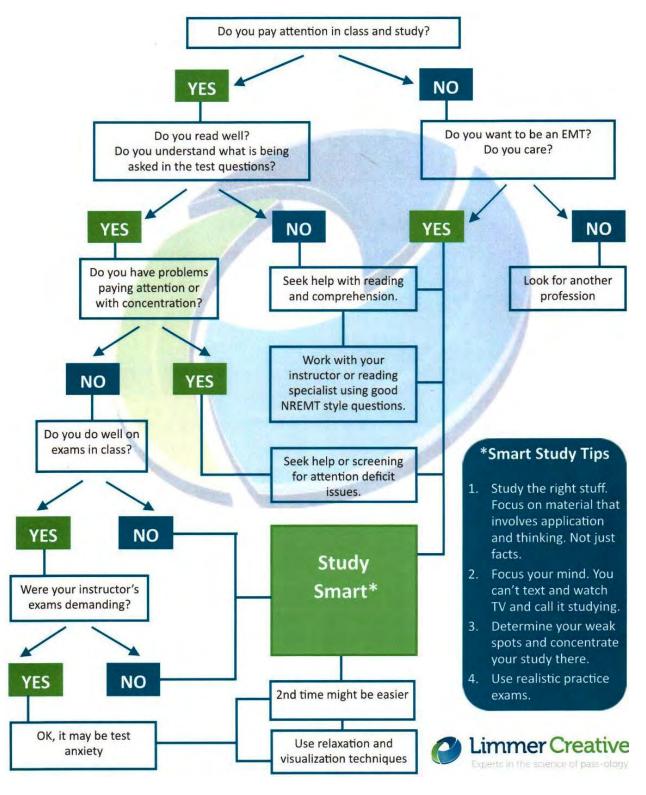
Refer to Missouri Bureau of Emergency Medical Services (BEMS) website (http://health.mo.gov/safety/ems) for information on the scope of practice and licensing requirements to practice as an EMR, EMT, AEMT, Paramedic, or Community Paramedic in the state of Missouri.

To be eligible for Missouri State Department of Public Safety - Division of Fire Safety testing, students must have a course grade of at least 70%. A terminal competency form will be completed for each Academy program and those forms are found in the Academy syllabus.

Refer to the International Board of Specialty Certification (IBSC) website (https://www.ibscertifications.org) for information on testing for Community Paramedic, Critical Care Paramedic, Flight Paramedic, or Tactical Paramedic.

Refer to the National EMS Management Association (NEMSMA) website (http://www.nemsma.org) for information on Supervising Officer, Managing Officer, and Executive Officer testing requirements.

Sub-Section 2.680.50 - Trouble Passing Exams?



(Limmer Creative, 2015)

Section 2.720 - Generic Education Calendar

The following calendars are for guidance only and are subject to change without notice. At the beginning of each trimester, a course announcement will be posted and distributed with specific courses and dates.

Sub-Section 2.720.24 - Spring Trimester Education Calendar

Month	Week	Course	Paramedic Academy
Jan		New Year's Day (Jan 1)	First trimester
		Mandatory holiday from coursework	(current year's class).
	1		
	2	Advisory Board Meeting	Fourth trimester
	3		(previous year's class).
	4		
Feb	1	EMT and Paramedic Refresher begins	
	2		
		Washington's Birthday (Third Mon in Feb)	
		Mandatory holiday from coursework)	
	3		
	4		
Mar	1	PHTLS	
	2	Competencies (by Polk Co FTOs)	
	3	Competencies (by Polk Co FTOs)	
	4	Competencies (by Polk Co FTOs)	
Apr	1	FTO Meeting	
	2		
	3	Safety Seminar	
	4		

Sub-Section 2.720.48 - Summer Trimester Education Calendar

Month	Week	Course	Paramedic	EMT Academy
			Academy	
May	1		Second trimester	
	2	Advisory Board Meeting	(current year's	
	3		class).	
		Memorial Day (last Mon in		
		May)		
		Mandatory holiday from		
		coursework		
	4			
Jun	1			Begin taking
				applications
	2	PHTLS		
	3			
	4			
Jul	1			Application deadline
		Independence Day (Jul 4)		
		Mandatory holiday from		
		coursework		
	2	Competencies (by Cedar Co		EMT entrance exams
		FTOs)		
	3	Competencies (by Cedar Co		
		FTOs)		
	4	Competencies (by Cedar Co		
		FTOs)		
Aug	1			Announce students
	2			
	3	Safety Seminar		EMT badge packets
				due
	4			

Sub-Section 2.720.72 - Fall Trimester Education Calendar

Month	Week	Course	Paramedic Academy	EMT Academy
Sep		Labor Day (First Mon in Sep) Mandatory holiday from coursework	Third trimester (current year's class)	
	1			Academy begins
	2	Advisory Board Meeting		
	3			
	4			
Oct	1	FTO Meeting	Begin taking applications (for next year's class)	
	2	Competencies (by Hickory and St Clair FTOs)		
	3	Competencies (by Hickory and St Clair FTOs)		
	4	Competencies (by Hickory and St Clair FTOs)		
Nov	1		Application deadline	
		Veterans Day (Nov 11) Mandatory holiday from coursework		
	2		Paramedic entrance exams	
	3			
		Thanksgiving Day (Fourth Thu in Nov) Mandatory holiday from coursework		
	4			
Dec	1		Announce students	
	2	Safety Seminar		
	3		Paramedic badge packets due	
		Christmas Day (Dec 25) Mandatory holiday from coursework		
	4		Graduation	Graduation

Section 2.760 - Photo and Video Release

I give permission to CMH or any authorized agency, television or newspaper source to take photos or videos of me. I also give permission to have those photos and/or videos used by CMH in an appropriate manner for the promotion of CMH, CMH EMS, or CMH EMS Education Department. I release all rights to the photos and videos and the publications and media in which they are published or aired for CMH.

I hereby perpetually authorize CMH to take, use, re-use, publish, and republish photos, videos, or audio recordings in which I appear or may be heard in whole or in part, individually, or in conjunction with other photographs, in any medium, for publicity, media, or marketing purposes, including, without limitation, for purposes of illustration, promotion, advertising, or trade. I hereby release CMH from any and all claims and demands arising out of or in connection with the creation and use of such photos, videos, or audio recordings. This authorization shall inure to the benefit of the legal representatives, licenses, heirs, and assigns of myself and Citizens Memorial Hospital.

Print name:		
Signature:		
Date:		

Section 2.800 - Authorization for Release of Information

I authorize a member of CMH EMS Education Department to release the following information to the authorized persons listed.				
 My name My address My phone number My email address My student transcript My course grade. Specify which course 	se:			
List of authorized persons:				
Name	Agency or relation			
Print name:				
Print name:Signature:				

Section 2.840 - Policy Manual Acknowledgment

My signature below indicates that I have received, read, and understood the policy manual. I agree to follow and adhere to the guidelines set forth by the policy manual, class syllabus, and the instructors. I have received, read, and understood the clinical requirements for the course I am enrolling. I agree to follow and adhere to the guidelines set forth by each course and clinical site. I understand that my final grade will be impacted by my actions or my inactions. I understand that my success or lack thereof is solely my responsibility and not that of the faculty or staff. I take full responsibility for myself and my actions.

As a student, I understand that my performance will be evaluated by faculty, instructors, preceptors, FTOs, and clinical educators in cognitive, psychomotor, and affective domains. I will be informed of the content of these evaluations.

Safety is required of all EMS students. The following are grounds for course failure and may result in dismissal from the course:

- Preceptor, FTO, or clinical educator refusal to continue working with the student due to clinical safety issues.
- Inappropriate or unsafe behavior during educational activities that indicates impaired judgment and/or unfit condition for the learning environment.
- Abuse or inappropriate behavior.
- Patient neglect.
- Breach of patient confidentiality (HIPAA).
- Dishonesty with the patient or own actions.
- Refusal to follow directions or commands given by preceptors, FTOs, instructors, faculty, or clinical educators that are meant to ensure your safety, other responder's safety, or patient safety.
- Other unsafe clinical practice as deemed by faculty.

By signing below, I acknowledge that I have read and understood the list above and will act in a safe manner.

Print name:		
Signatura		
Signature:		
Date:		

Part 3 - Policy Manuals / Syllabi

Section 3.070 - Continuing Education Courses



Sub-Section 3.070.19 - CE Program Faculty

The designated director for the CE program is the EMS Education Director. The CE lead instructors will be selected by the EMS Education Director for each course to be taught.

Sub-Section 3.070.38 - CE Curriculum Purpose

Provide specialty core and support courses to ensure the achievement of program goals and learning domains and to meet or exceed the content and competency demands of the latest edition of applicable standards of care and National Standard Curriculum.

Sub-Section 3.070.57 - CE Curriculum

Curriculum and lesson plans for CE courses will be approved by the EMS Education Director and reviewed by the Medical Director at his/her discretion.

Sub-Section 3.070.76 - BEMS Core Requirements for Re-Licensure

At the beginning of each refresher course, the Lead Instructor will review the current MO BEMS requirements on their website (http://health.mo.gov/safety/ems/licensing.php) to create and conduct the course to meet those requirements.

Section 3.140 - Life Support Courses



Section 3.210 - EMD Academy



This section serves as the course syllabus for the Medical Dispatcher Academy.

A maximum of 16 students will be accepted into each EMD program.

Sub-Section 3.210.11 - EMD Academy Goal

Equip students with all the education needed to be a high-performing EMD in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains and a desirable candidate for employment as an Emergency Medical Dispatcher.

Sub-Section 3.210.22 - EMD Academy Faculty

The designated program director for the EMD program is the EMS Education Director. The EMD lead instructor will be selected by the EMS Education Director.

Sub-Section 3.210.33 - EMD Academy Curriculum Purpose

Provide specialty core and support courses to ensure the achievement of program goals and learning domains and to meet or exceed the content and competency demands of the latest edition of the NHTSA National Standard Curriculum.

Sub-Section 3.210.44 - EMD Academy Curriculum

The EMD program will use the NHTSA National Standard Curriculum. Specifically, the current edition curriculum and textbooks from the International Academies of Emergency Dispatch will be utilized for EMD courses.

Sub-Section 3.210.55 - EMS 101 (Emergency Medical Dispatcher) Course

This section is reserved for classroom details for EMS 101.

Sub-Section 3.210.66 - EMD Academy Examination Requirements

Each student must achieve a cumulative score of no less than 80% to successfully complete the course. Additionally, each student must achieve a score of no less than 70% on each test and competency throughout the course.

Sub-Section 3.210.77 - EMD Academy Clinical Requirements

There are no clinical requirements for EMD Academy. However, students are highly encouraged to ride on an ambulance for 12 hours as a job shadow (no patient contact).

Sub-Section 3.210.88 - EMD Student Clinical Evaluation Cards

Thank you for being a preceptor for a CMH EMD clinical EMD students are to student. observe only without any patient contact or skills. For the student to get credit for completing this clinical, an evaluation must be completed by you. Please go to the following link and complete the shift evaluation. http://ozarksems.com/eval-clinical.php Student name: Clinical date: Time in: Time out: School contact for exposure or other reasons: Theron Becker 417-597-3688 Thank you for being a preceptor for a CMH EMD clinical EMD students are to student. observe only without any patient contact or skills. For the student to get credit for completing this clinical, an evaluation must be completed by you. Please go to the following link and complete the shift evaluation. http://ozarksems.com/eval-clinical.php Student name: _______ Clinical date: ______ Time in: ______ Time out: ______

School contact for exposure or other reasons:

Theron Becker 417-597-3688

Section 3.280 - EMR Academy



This section serves as the course syllabus for the Medical Responder Academy.

A maximum of 16 students will be accepted into each EMR Program.

Sub-Section 3.280.09 - EMR Academy Goal

Equip students with all the education needed to be a high-performing EMR in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains and an asset to the community as an Emergency Medical Responder.

DESCRIPTION

According to the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP), the following is the description of the Emergency Medical Responder:

The primary focus of the Emergency Medical Responder is to initiate immediate lifesaving care to critical patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide lifesaving interventions while awaiting additional EMS response and to assist higher level personnel at the scene and during transport. Emergency Medical Responders function as part of a comprehensive EMS response, under medical oversight. Emergency Medical Responders perform basic interventions with minimal equipment.

Sub-Section 3.280.18 - EMR Academy Faculty

The designated program director for the EMR program is the EMS Education Director. The EMR lead instructor will be selected by the EMS Education Director.

Sub-Section 3.280.27 - EMR Academy Curriculum Purpose

Provide specialty core and support courses to ensure the achievement of program goals and learning domains and to meet or exceed the content and competency demands of the latest edition of the NHTSA National Standard Curriculum.

Sub-Section 3.280.36 - EMR Academy Curriculum

The EMR program will use the NHTSA National Standard Curriculum. Specifically, the current edition curriculum and textbooks from AAOS (published by Jones & Bartlett) will be utilized for EMR courses.

Current edition is "Emergency Medical Responder: Your First Response in Emergency Care -6th edition" with "Navigate 2 Advantage Package."

ISBN: 9781284107272



Sub-Section 3.280.45 - EMS 201 (Emergency Medical Responder) Course

Section	Chapter	Duration (hr)
1 - Preparatory	1 - EMS Systems	1.5
	2 - Workforce Safety and Wellness	1.5
	3 - Lifting and Moving Patients	2.5
	4 - Medical, Legal, and Ethical	1
	5 - Communication and Documentation	1.5
	6 - Human Body	2
2 - Airway	Basic Life Support	6
	7 - Airway Management	2.5
	8 - Professional Rescuer CPR	2
3 - Assessment	9 - Patient Assessment	2.5
MID-TERM EXAM / PRACTION	CAL SKILLS	4
4 - Medical	dical 10 - Medical Emergencies	
	11 - Poisoning and Substance Abuse	2
	12 - Behavioral Emergencies	1.5
	13 - Environmental Emergencies	1.5
5 - Trauma	14 - Bleeding, Shock, and Soft-Tissue Injury	4
	15 - Injury to Muscles and Bones	3.5
6 - Special Patient Populations	16 - Childbirth	2
	17 - Pediatric Emergencies	3.5
	18 - Geriatric Emergencies	2
7 - EMS Operations	19 - Transport Operations	1
	20 - Vehicle Extrication and Special Rescue	2
	21 - Incident Management	2
FINAL EXAM / PRACTICAL	4	
	TOTAL	59 hours

Sub-Section 3.280.54 - EMR Academy Examination Requirements

Each student must achieve a cumulative score of no less than 80% to successfully complete the course. Additionally, each student must achieve a score of no less than 70% on each test and competency throughout the course.

Sub-Section 3.280.63 - EMR Academy Academic Progress

To remain in and progress through the EMR Academy, the student must:

- Remain in compliance with policies and procedures outlined in this manual.
- Maintain 80% or higher attendance.

Students are responsible to constantly monitor his or her own learning process. Current standing and grades are available upon request. Every effort will be made to maintain grade records in an online format for instant access by students. Students are strongly encouraged to request appropriate faculty guidance and assistance with any curriculum material or any clinical objectives he or she is having difficulty mastering.

Sub-Section 3.280.72 - EMR Academy Clinical Requirements

There are no clinical requirements for EMR Academy. However, students are highly encouraged to ride on an ambulance for 12 hours as a job shadow (no patient contact).

Sub-Section 3.280.81 - EMR Student Clinical Evaluation Cards

Thank you for being a preceptor for a CMH EMR clinical EMR students are to student. observe only without any patient contact or skills. For the student to get credit for completing this clinical, an evaluation must be completed by you. Please go to the following link and complete the shift evaluation. http://ozarksems.com/eval-clinical.php Student name: Clinical date: Time in: Time out: School contact for exposure or other reasons: Theron Becker 417-597-3688 Thank you for being a preceptor for a CMH EMR clinical EMR students are to student. observe only without any patient contact or skills. For the student to get credit for completing this clinical, an evaluation must be completed by you.

For the student to get credit for completing this clinical, an evaluation must be completed by you.

Please go to the following link and complete the shift evaluation.

http://ozarksems.com/eval-clinical.php

Student name:

Clinical date:

Time in:

Time out:

School contact for exposure or other reasons:

Theron Becker 417-597-3688

Section 3.350 - EMT Academy



This section serves as the course syllabus for the EMT Academy. A maximum of 16 students will be accepted into each EMT Academy.

Sub-Section 3.350.04 - EMT Academy Goal

Equip students with all the education needed to be a high-performing EMT in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains and a desirable candidate for employment as an Emergency Medical Technician.

DESCRIPTION

According to the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP), the following is the description of the Emergency Medical Technician:

The primary focus of the Emergency Medical Technician is to provide basic emergency medical care and transportation for critical and emergent patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide patient care and transportation. Emergency Medical Technicians function as part of a comprehensive EMS response, under medical oversight. Emergency Medical Technicians perform interventions with the basic equipment typically found on an ambulance. The Emergency Medical Technician is a link from the scene to the emergency health care system.

LIFE CHANGES DURING THE ACADEMY

During this academy, students are highly encouraged not to make any other large life changes (i.e. get married, get divorced, move residences, change jobs, etc.). Additionally, in order to have enough time to prepare for and complete all requirements of the academy, a maximum work load of 36 hours per week is recommended. If the student's overall score is less than 80%, the recommended work load is reduced to 24 hours and further reduced to 12 hours if the overall score is less than 70%.

Sub-Section 3.350.08 - EMT Academy Faculty

MEDICAL DIRECTOR

Tony Cauchi, MD is a board certified emergency medicine physician. Dr. Cauchi attended medical school at Texas Tech University and completed his internship and residency at Michigan State University. He is currently the Chief Medical Officer for Triad Physician Solutions, a physician in the US Army, and the medical director for Citizens Memorial Hospital Emergency Room.



PROGRAM DIRECTOR

Theron Becker, MMPA, EFO, BS-FPE, NRP is a Nationally Registered Paramedic. Mr. Becker is the Director of the EMS Education Department at Citizens Memorial Hospital. Theron got his EMT license in 1995 while attending the Fire Engineering program at Oklahoma State University. Since then, he has obtained a Master degree in public administration management and Executive Fire Officer from the National Fire Academy.



Theron has been a volunteer firefighter since he was 16 years old in SW Missouri and has been employed on hazmat teams, as a fire protection engineer, and in public health in bioterrorism preparedness.

Full bio and curriculum vitae can be found here: http://ozarksems.com/theron-resume.php

LEAD INSTRUCTOR

Ryan McDonald, EMT-P is a Missouri state licensed paramedic. Mr. McDonald took his EMT class through Breech Paramedics in Lebanon, MO in 1992. He graduated from paramedic class in 1994 through St. John's EMS in Springfield, MO. He also served ten years of volunteer fire service with the Lebanon Rural Fire Protection District from 1991 to 2001.

Mr. McDonald has over 20 years of EMS service, and has worked at multiple EMS services in Southwest Missouri over his career, in both full- and part-time/PRN positions. He has been with CMH EMS since 2016, and obtained his instructor certification in the Spring of 2018. He instructed his first EMT Academy in the Fall of 2018, and continues with pursuits of other educational instruction with CMH.



LEAD INSTRUCTOR

Bobby J. O'Keefe A.A.S., NRP, FP-C obtained his EMT certificate through OTC in Springfield then went on to Paramedic school at St. John's Paramedic Academy and is a Nationally Registered Paramedic. Bobby has a degree in EMS and has also obtained his Flight Paramedic Certification. Bobby has worked in EMS for 13 years and has also volunteered as a firefighter and first responder in his hometown of Stockton. Bobby has worked as a Paramedic in both county and city settings. Bobby has worked as a Tactical Paramedic attached to a S.W.A.T. team and has flown as a Flight Paramedic. Bobby has taught Emergency Medical Responder class and EMT classes. Bobby has a wife and daughter and enjoys spending time with family and friends.



Sub-Section 3.350.12 - EMT Academy Curriculum Purpose

Provide specialty core and support courses to ensure the achievement of program goals and learning domains and to meet or exceed the content and competency demands of the latest edition of the NHTSA National Standard Curriculum.

Sub-Section 3.350.16 - EMT Academy Curriculum

The EMT program will use the National EMS Education Standards.

Specifically, the current edition curriculum and textbooks from AAOS (published by Jones and Bartlett) will be utilized for EMT courses.

The current edition of the textbook used is "Emergency Care and Transportation of the Sick and Injured - 11th edition" with "Navigate 2 Advantage Package."

ISBN: 9781284106909



"Barron's Emergency Medical Technician Exam - 3rd edition"

ISBN: 9781438003801



Sub-Section 3.350.20 - EMT Academy Prerequisites

Students must complete the following before completing the first day of class:

- Have regular access to a personal computer with reliable internet access and some type of word processing software.
- Will be at least 18 years old before scheduled clinical time.
- Complete application process (including application fee, interview, and acceptance into the program).
- Verify vaccinations:
 - Two-step tuberculosis (TB) screening,
 - Diphtheria and tetanus (TDAP),
 - Measles, mumps, and rubella (MMR),
 - Hepatitis B,
 - And seasonal influenza. Annual influenza vaccinations will be required throughout the Paramedic Academy.
- Ability to obtain Missouri Class E Driver License.
- Completion of student ID process at CMH HR (certification of insurance application, HIPAA video, and criminal background check).
 - Must not have a criminal background of felonies or drug-related convictions.
 - Must have the ability to pass a drug screen.
- Ability to meet functional requirements of EMT job responsibilities.

Sub-Section 3.350.24 - EMT Academy Functional Abilities Required

CMH EMS Department does not discriminate against any individual with disabilities. However, there are certain technical standards, essential functions, and physical demands which are required of the EMT. The physical requirements are listed below and the student must be able to perform these requirements as well as have satisfactory physical health. NOTE: Additional requirements are often required by employers to those listed below.

Students must be able to achieve all clinical objectives, and below items in the list of functional abilities, which are an inherent part of the clinical objectives. Students returning to school following an illness or injury must submit a letter from his or her doctor indicating any restrictions. Situations with a student placed on restrictions from a doctor will be considered on a case-by-case basis. Determination will then be made after evaluation of the restriction and time frame indicated by the doctor regarding the student's ability to meet all clinical objectives and remain in the academy.

- Gross motor skills: Move within confined spaces, sit and maintain balance, stand and maintain balance, reach above shoulders (i.e. hang an IV bag), and reach below waist (i.e. plug an electrical plug into an outlet).
- Fine motor skills: Pick up objects with hands, grasp small objects with hands, write with pen or pencil, type on a computer keyboard, pinch and pick or otherwise work

- with fingers (i.e. manipulate a syringe), twist (i.e. turn knob), squeeze with fingers (i.e. eye dropper), and able to safely operate a motor vehicle (i.e. an ambulance).
- Physical endurance: Stand (i.e. at patient side during a procedure), sustain repetitive movements (i.e. CPR compressions), and maintain physical tolerance (i.e. assist a patient walking).
- Physical strength: Push and pull 50 pounds (i.e. position patients), support 50 pounds of weight (i.e. ambulate a patient), lift 50 pounds (i.e. pick up a child), move 50 pound objects (i.e. transfer a patient), defend against combative patient, carry equipment and supplies, use upper body strength (i.e. physically restrain a patient), and squeeze with hands (i.e. operate a fire extinguisher).
- Mobility: Twist, bend, stoop, squat, move quickly (i.e. in response to an emergency), climb (i.e. ladders), and walk.
- Hearing: Hear normal speaking levels (i.e. person-to-person report), hear faint voices, hear faint body sounds (i.e. blood pressure), hear in situations when not able to see lips, hear auditory alarms.
- Visual: See objects at arms-length (i.e. computer screen), see objects around 20 feet away (i.e. patient in a room), see objects more than 20 feet away (i.e. obstacles on the roadway), use depth perception, use peripheral vision, distinguish color (i.e. color codes on equipment), distinguish color intensity (i.e. skin color).
- Tactile: Feel vibrations (i.e. palpate pulse), detect temperature (i.e. skin), feel differences in surface characteristics (i.e. skin turgor), feel differences in sizes and shapes (i.e. palpate vein), and detect environmental temperature (i.e. check for drafts).
- Smell: Detect odors from patient (i.e. alcohol breath), detect smoke, and detect gases or noxious smells.
- Reading: Read and understand written documents (i.e. protocols).
- Arithmetic competence: Read and understand columns of writing (i.e. charts), read digital displays, read graphics (i.e. EKG), calibrate equipment, convert numbers to and from metric system, tell time, measure time (i.e. count duration of contractions), count rates (i.e. breaths per minute), use measuring tools (i.e. thermometer), read measurement marks (i.e. scales), add/subtract/multiply/divide whole numbers, compute fractions (i.e. medication dosages), use a calculator, and write numbers.
- Emotional stability: Establish therapeutic boundaries, provide patients with emotional support, adapt to changing environments and stress, deal with the unexpected (i.e. patient crisis), focus attention on task, monitor own emotions, perform multiple responsibilities concurrently, and handle strong emotions (i.e. grief).
- Analytical thinking: Transfer knowledge from one situation to another, process information, evaluate outcomes, problem solve, prioritize tasks, use long-term memory, and use short-term memory.
- Critical thinking: Identify cause and effect relationships, plan and control activities for others, synthesize knowledge and skills, and sequence information.
- Interpersonal skills: Negotiate interpersonal conflict, respect differences in patients and co-workers, and establish rapport with patients and co-workers.
- Communication skills: Teach (i.e. patient education), explain procedures, give oral reports, interact with others, communicate on the telephone, communicate on a radio, influence people, direct activities of others, convey information through writing.

Sub-Section 3.350.28 - EMT Academy Tuition Details

Tuition of \$750 includes textbooks, online access codes, polo shirts (2), and testing fees (re-testing fees not included). Application deadline is at least four weeks before class start date. A non-refundable application fee of \$50 is due at time of application. Fees and tuition can be paid by check, credit card, or CMH employee payroll deduction. If paying by credit card, an additional 2.5% will be required to cover added expenses by credit card companies.

A payment schedule is available with the following amounts and deadlines:

- \$350 is due by the first day of class.
- An additional \$200 is due before the Mid-Term Exam can be taken (usually during week 8).
- An additional \$200 is due before the Final Exam can be taken.

Sub-Section 3.350.32 - Rick Seiner Memorial EMT Academy Scholarship

Each year, each of the following individuals can sponsor one (1) scholarship to attend the EMT Academy:

- CMH EMS Director
- Each CMH EMS Manager

An official recommendation must be received by the EMS Education Director at the time of application into the Academy. All application and entrance requirements must be met by deadlines provided; however, the application fee and tuition fees will be waived.

Award selection criteria is based on a point system. The student applicants with the highest points will be awarded the scholarship. Student name: Apply for year/trimester: I attest that I meet the following qualifications (select all that apply): I have read the obituary for Rick Seiner and, if awarded, I agree to live up to Rick's memory through being an EMS professional and student worthy of his name. [Mandatory] My household income falls within the pre-tax, gross income required to qualify for one or both of the programs below. Verification of income may be required. Household size:____ Monthly income: Missouri Food Stamps (https://mydss.mo.gov/food-assistance/food-stampprogram/income-limits) [10 points] Missouri WIC (https://health.mo.gov/living/families/wic/eligibility_income.php) [5 points] I am currently an active volunteer emergency responder in my community. Agency: Chief Signature: [2 points] I am currently an employee of Citizens Memorial Hospital. [5 points] I intend to work at CMH as an EMT after graduation. [1 point] I intend to further my education and become a paramedic or RN within the next five years. [1 point] Student signature:

RICKY A. SEINER OBITUARY (NOV 16, 1951 - SEP 2, 2005):



Ricky Allen "Rick" Seiner, 53, of Bolivar died from injuries he received Friday evening, Sept. 2, 2005, after he was struck by an automobile while working an accident as an Emergency Medical Technician near Humansville.

Rick was born Nov. 16, 1951, in Springfield Baptist Hospital in Springfield, the son of Robert Allen "Bob" Seiner and Helen Darlene Franklin Seiner. Rick was a 1970 graduate of Bolivar High School. After graduating high school, he enlisted in the U.S. Army Reserve and trained at Fort Campbell, Ky.

Rick started working when he was 15 years old at Wood's Super Market in Bolivar and worked for 28 years. When the Polk County 911 was established, Rick was employed as a dispatcher and later he completed his training to become an EMT. Rick proudly served the community as an EMT with Citizens Memorial Hospital for the past 10 years. He also taught EMT Board Certification courses for the state of Missouri, worked for the Polk County Fire and Rescue and the Polk County Ambulance. Rick was a dedicated employee, missing only one day of work in 38 years.

Rick was a lifelong resident of Polk County. He grew up on a farm southeast of Bolivar where he helped his dad milk cows. He loved the St. Louis Cardinals baseball team and loved to hunt and fish. He also took pleasure in coaching his sons' Little League baseball teams.

Rick was united in marriage to Mary L. Caraway June 21, 2005. He was a member of the First Assembly of God Church in Bolivar where he and Mary attended.

Surviving are his wife, Mary, of the home; his three sons, Cassidy Seiner of Springfield, Tyler Seiner and Devin Seiner, both of Bolivar; a stepson, Joshua Miller of Hurst, Texas; a stepdaughter, Erin Miller of Bolivar; his parents, Bob and Darlene Seiner of Bolivar; two brothers, Brent Seiner and wife Vesta of Bolivar and Rocky Seiner and wife Patsy of Macon; and his sister, Teresa Parson and husband Mike of Bolivar.

Sub-Section 3.350.36 - EMT Academy Application and Selection Process

CMH EMS Education Department will review completed student applications. Upon meeting minimum admission standards, or higher, qualified applicants will be offered a seat in the EMT Academy in the following priority:

- CMH employee.
- First responder agency within CMH's seven-county service area.
- Highest entrance exam score (if applicable).

In the event of more applicants than available seats, an entrance exam is used to select and admit prospective EMT students with the best chances of success in the EMT Academy. It is also used as a diagnostic tool to assess the incoming students' strengths and weaknesses.

Sub-Section 3.350.40 - EMT Academy Experiential Learning

Credit for experiential learning, advanced placement, or transfer of credits from another institution will not be offered or provided with the exception of minor certificates. Minor certificates that have previously been completed may be used in lieu of attending those specific classes again. Case-by-case approval must be attained and certificates provided prior to the class in question. Additionally, if the course has a post-test, you must repeat the post-test with the rest of the class and that test score will be used. Examples include, but not limited to:

- AHA courses,
- NAEMT courses,
- NIMS courses,
- NIHSS course,
- Etc.

Sub-Section 3.350.44 - EMT Academy Classroom Details

The class will meet two weekday nights from 6 pm to 10 pm at CMH EMS Headquarters Classrooms located at 1525 N Oakland Ave, Bolivar, MO. Weekdays may be Monday and Wednesday or Tuesday and Thursday. In the event of too many students for one session and additional instructors are available, two concurrent courses may be held on both Mon/Wed and Tue/Thu. Every other weekend days will also be required to complete additional courses. Clinical activity (described below) is in addition to the classroom days described here. Coursework, classroom activities, and in-class testing will focus on personal safety, teamwork, and exceptional, compassionate patient care. Extensive use of simulation and scenario education will be included. Additionally, personal work habits and fitness activities will be included to prepare students for a life-long career in EMS.

Generic weekly schedule:

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Morning	Occasional	Paramedic			Paramedic		EMT
Afternoon	EMT Class	Class			Class		Class
							every
							other Sat
Evening		M/W EMT	T/T	M/W	T/T EMT		
		Class	EMT	EMT	Class		
			Class	Class			

Sub-Section 3.350.48 - EMT Academy Simulation Requirements

Each student will be assigned a partner for simulation activities. A schedule will be developed where each team will be responsible for responding to simulated emergencies. These simulated emergencies may occur at any time during the EMT classroom time. If your team is "on duty" for the day, you will be expected to have the assigned response equipment checked and available before start of class and left in service and available for the next class and next "on duty" team.

Teams not "on duty" will be required to observe the simulated emergency. All teams will be required to document the activity using the provided ePCR documentation forms and/or software.

Sub-Section 3.350.52 - EMT Academy Academic Progress

To remain in and progress through the EMT Academy, the student must:

- Remain in compliance with policies and procedures outlined in this administration manual
- Submit to annual influenza immunization.

Students are responsible to constantly monitor his or her own learning process. Current standing and grades are available upon request. Every effort will be made to email grade records at the completion of each chapter.

Students are strongly encouraged to request appropriate faculty guidance and assistance with any curriculum material or any clinical objectives he or she is having difficulty mastering.

Sub-Section 3.350.56 - EMT Academy Grade Calculation

Each chapter score (CHA) is calculated with the following formula. In simple terms, the Platinum post-test is 50% of the chapter score and the combined results of any quizzes make up the other 50%.

$$CHA = average(PLA, average(QUI))$$

- CHA = Chapter score
- PLA = Platinum post-test score
- QUI = Quiz score

The overall Academy score (ACA) is calculated with the following formula. In simple terms, if you pass your clinical, affective, and psychomotor evaluations, your Academy score is an average of all the chapter scores. If you do not pass your clinical, affective, or psychomotor evaluations, your Academy score is zero.

$$ACA = if(and(CLI, AFF, PSY = "pass"), average(CHAs, MTE, FTE), 0)$$

- ACA = Academy score
- AFF = Affective score
- CHA = Chapter score
- FTE = Final trimester exam
 - Must complete the Platinum Adaptive Test with a "GOOD" summary score with the following settings to take the final exam:
 - Type: Timed Test
 - Curriculum: Educational Standards
 - Module: Comprehensive
- MTE = Mid-trimester exam
- PSY = Psychomotor score

Sub-Section 3.350.60 - Certifications Gained after Completion of the EMT Academy

- Prepared and eligible to test for Missouri Licensed Emergency Medical Technician
- Prepared and eligible to test for Nationally Registered Emergency Medical Technician
- Prepared and eligible to test for Missouri Class E Driver License
- American Heart Association (AHA) Basic Life Support (BLS)
- National Association of EMTs (NAEMT) EMS Safety
- National Association of EMTs (NAEMT) PreHospital Trauma Life Support (PHTLS)
- Missouri University Hazardous Materials Incident Response: Awareness
- National Incident Management System (NIMS) 100: Introduction to the Incident Command System (self-study)
- National Incident Management System (NIMS) 700: Introduction to National Incident Management System (self-study)
- Traffic Incident Management (TIMS)
- National Association of EMTs (NAEMT) Emergency Vehicle Operator Safety (EVOS)

Sub-Section 3.350.64 - EMT Academy Examination and Graduation Requirements

To be eligible for state and national testing, the student must meet the following requirements:

- Achieve a cumulative score of no less than 80%.
- Attain a "pass" grade in all clinical activities due at the end of each course.
- Attain a score of at least 70% on at least 70% of all assignments, chapter quizzes, and unit tests.
- Completion of all assigned unit exams. Unit exams, mid-term exams, and final exams are counted as twice the weight of chapter tests.
- Successfully complete all clinical minimum hour, patient contact, and skill requirements.
- A "pass" certification on the final psychomotor evaluation, which will include all practical skills as required by NREMT for this level of licensure.

Sub-Section 3.350.68 - Tips to Succeed on an EMT Academy Exam

Exams are designed to assess your knowledge and critical thinking ability. Questions are authored by instructors across the country and reviewed by subject matter experts and a board certified Emergency Physician. After you finish the exam, we hope you will come away with a good understanding of topics that you mastered along with ones that need improvement.

The exams are intended to prepare you for your national or state certification exam. In addition to studying the textbook, we recommend familiarizing yourself with current American Heart Association guidelines.

Exam items generally include the following question styles. Understanding how to interpret these questions will help you succeed.

WHAT SHOULD YOU DO?

• These questions ask you to apply knowledge to treat a patient as you would in the field. You should select the best treatment option available. If you feel there are multiple "correct" answers then pick the BEST option by imagining that there is a "next" or "first" at the end. E.g. "What should you do next?" or "What should you do first?"

WHAT SHOULD YOU SUSPECT?

• These questions ask you to diagnose patients by suspecting underlying comorbidities or pathophysiologies that are described in the question. If more than one answer seems "correct," think of the condition that is the most life-threatening. You should suspect the most lethal diagnosis given the signs and symptoms.

WHAT IS THE MOST LIKELY CAUSE?

• These questions are asking you to think about the most probable cause or condition based on the signs and symptoms. This type of question asks about what is most likely, NOT the most lethal.

TEST-TAKING TIPS:

- Read the question completely. Before looking at the possible answers imagine what you should do to take care of the patient.
- Read all possible answers completely and consider the BEST answer.
- During the exam, if your instructor allows, we encourage you to write down (on a blank piece of paper) words or topics you want to review afterwards.
- All questions are randomized, so don't get discouraged if you get difficult ones right away.

We wish you the best on this exam, on your certification exam, and ultimately in your new career as an EMS professional!

Sub-Section 3.350.72 - EMT Academy Clinical Requirements

Clinical experience is defined as a planned and scheduled educational student experience with live patient contact activities in settings, such as hospitals, clinics, free-standing emergency centers, and may include field experience.

Field experience is defined as planned and scheduled educational student time spent on an EMS unit, which may include observation and skill development, but which does not include team leading and does not contribute to the CoAEMSP definition of field internship.

ELIGIBILITY

To be eligible to attend clinical rotations, the student must maintain passing status (70%) overall grade) in the EMT Academy.

STAFF SUBSTITUTIONS

At no time may an EMT student be substituted for EMT staff. If the EMT student is also an employee of the clinical site:

- When functioning as an EMT student:
 - Must wear student uniform.
 - Must not perform normal work duties that are outside the scope of the clinical objectives.
- When functioning as staff:
 - Must not wear student uniform.
 - Must not perform clinical student activities outside the scope of employed job description.

GENERAL REQUIREMENTS

Students are required to participate and be eligible to participate at all clinical sites without exception. Students must also comply with the facilities' policies and procedures. CMH is not obligated to locate an additional clinical site to accommodate a student for any reason.

Courses with a clinical component require mastery of the clinical objectives in order to successfully complete the course. The clinical component of any course is an integral portion of that course. Clinical experiences are graded on a pass/fail basis. If a student fails in clinical, he or she will fail the course. Students will be sent home from the clinical setting for unsafe or unprofessional behavior and may be grounds from dismissal from the course.

SCOPE

If, at any time during a clinical rotation, a student is asked to perform outside his/her scope of training, that student shall immediately tell the requestor that they are not trained for that procedure and are not allowed to do it.

IDENTIFICATION

All students will be required to wear a CMH-issued ID badge during all classroom, skills, and clinical rotations. The name badge shall be returned upon course completion (or having dropped the course). Students will assume replacement cost if their name badge is lost, mutilated, or destroyed. Replacement cost will be \$10 each.

LABORATORY REQUIREMENTS

Required basic laboratory competencies are listed below. These requirements must be completed prior to any live patient encounters. At least one (1) evaluation must be completed on you by an instructor or preceptor while you complete the following skills:

- 12-lead ECG placement (NREMT skill).
- Automated external defibrillator (AHA skill)
- CPR for adults, children, and infants with both one- and two-rescuer (AHA skill)
- Glucometer (NREMT skill)
- Hemorrhage control (NREMT skill)
- Intranasal medication administration (NREMT skill)
- Joint splinting (NREMT skill)
- Long bone splinting (NREMT skill)
- Relief of choking in infants and children (AHA skill)
- Rescue breathing for adults and children with bag-mask (AHA skill)
- Spinal immobilization Adult seated patient (NREMT skill)
- Spinal immobilization Adult supine patient (NREMT skill)
- Traction splinting (NREMT skill)

CLINICAL REQUIREMENTS

Specific clinical requirements to be completed by the end of all clinical hours are listed below. These requirements can be worked on throughout all clinical sites.

- By the end of the trimester following the final exam, the student must have successfully documented an assessment on six (6) medical patients.
- By the end of the trimester following the final exam, the student must have successfully documented an assessment on six (6) trauma patients.

CLINICAL DOUBLE-DIPPING POLICY

In the event, you have a patient that has both medical and trauma complaints, this one patient can be counted as two separate patients if you perform a complete medical assessment and a complete trauma assessment.

However, if you encounter the same patient more than once in the same shift, the only way you can count multiple assessments is if the patient returns for a second visit to the ER or calls 911 a second time while riding on the ambulance.

LABORATORY AND CLINICAL DOCUMENTATION SOFTWARE

Platinum Planner will be used to document and track skills, labs, scenarios, simulations, and clinical contacts. It is the student's responsibility to complete documentation.

When documenting live patient contacts and skills in Platinum Planner, the first line in the narrative must contain a medical record number trackable to the patient. This could be a hospital number off a face sheet or an EMS run number. Spot checks will be done to ensure accurate documentation.

All documentation in Platinum Planner for lab, scenarios, clinicals, field experience, and field internship MUST be submitted within 48 hours of completing the activity. If documentation is submitted late, it will be rejected and will not count.

PLATINUM PLANNER SIGNUP DIRECTIONS:

- 1. Go to http://platinumed.com and click on "Create student account."
- 2. Complete the form. A course code will be given to you by your instructor.
- 3. Check your email and activate your account following the directions in the email.

Sub-Section 3.350.76 - EMS 301 (Emergency Medical Technician) Course

Thirteen (13) college credit hours - 206 contact hours.

This course includes all the classroom and laboratory activities to prepare students for a career as an Emergency Medical Technician.

PREREQUISITES:

Enrollment in the EMT Academy.

COURSE INSTRUCTORS:

- Tuesday/Thursday course: Ryan McDonald. Email: ryan.mcdonald@citizensmemorial.com.
- Monday/Wednesday course: Bobby OKeefe. Email: bobby.okeefe@citizensmemorial.com.
- Office hours by appointment.

Week	M/W	T/T	Description	Instructor	Tests and
	Date	Date			Exams
1	Mon	Tue	No class (Labor Day)		
	9/2/19	9/3/19			
	Wed	Thu	Study and Test Skills	OKeefe,	Ch 1 Quiz
	9/4/19	9/5/19	Ch 1 - EMS Systems	McDonald	
	Sat		AHA Basic Life Support CPR	Perkins,	BLS Test
	9/7/19		Course	Becker	
2	Mon	Tue	Ch 2 - Workforce Safety and	OKeefe,	Ch 2 Quiz
	9/9/19	9/10/19	Wellness	McDonald	Ch 3 Quiz
			Ch 3 - Medical, Legal, and		
			Ethical Issues		
	Wed	Thu	Ch 4 - Communications and	OKeefe,	Ch 4 Quiz
	9/11/19	9/12/19	Documentation	McDonald	Ch 5 Quiz
			Ch 5 - Medical Terminology		Syllabus
					Test
3	Mon	Tue	Ch 6 - Human Body	OKeefe,	Ch 6 Quiz
	9/16/19	9/17/19	Ch 7 - Life Span Development	McDonald	Ch 7 Quiz
	Wed	Thu	Ch 8 - Lifting and Moving	OKeefe,	Ch 8 Quiz
	9/18/19	9/19/19	Patients	McDonald	Ch 9 Quiz
			Ch 9 - Patient Assessment		
	Sat		Assessment Skills	OKeefe,	
	9/21/19			McDonald	
4	Mon	Tue	Ch 10 - Airway Management	OKeefe,	Ch 10 Quiz

Week	M/W Date	T/T Date	Description	Instructor	Tests and Exams
	9/23/19	9/24/19	Ch 11 - Principles of	McDonald	Ch 11 Quiz
), _ 0, 1	J. 2 15	Pharmacology	1,102 011010	
	Wed	Thu	Ch 12 - Shock	OKeefe,	Ch 12 Quiz
	9/25/19	9/26/19	Ch 13 - BLS Resuscitation	McDonald	Ch 13 Quiz
5	Mon	Tue	Ch 14 - Medical Overview	OKeefe,	Ch 14 Quiz
	9/30/19	10/1/19	Ch 15 - Respiratory Emergencies	McDonald	Ch 15 Quiz
	Wed	Thu	Airway and Respiratory Skills	OKeefe,	
	10/2/19	10/3/19	N. 7. 67 P. 1 1 1 1 1 7	McDonald	DETEN E
	Sat 10/5/19		NAEMT - Psychological Trauma in EMS Patients (PTEP)	Young	PTEP Test
6	Mon	Tue	Ch 16 - Cardiovascular	OKeefe,	Ch 16 Quiz
	10/7/19	10/8/19	Emergencies	McDonald	
	Wed 10/9/19	Thu 10/10/19	Ch 17 - Neurologic Emergencies	OKeefe, McDonald	Ch 17 Quiz
7	Mon	Tue	Ch 18 - Gastrointestinal and	OKeefe,	Ch 18 Quiz
	10/14/19	10/15/19	Urologic Emergencies	McDonald	Ch 19 Quiz
			Ch 19 - Endocrine and		
	*** 1		Hematologic Emergencies	0.77	G1 20 0 1
	Wed	Thu	Ch 20 - Immunologic	OKeefe,	Ch 20 Quiz
	10/16/19	10/17/19	Emergencies Ch 21 Taylorlogy	McDonald	Ch 21 Quiz
	Sat		Ch 21 - Toxicology	OKeefe,	Mid-Term
	10/19/19			McDonald	Practical
	10/15/15			MeBonara	Exam
8	Mon	Tue	Ch 22 - Psychiatric Emergencies	OKeefe,	Ch 22 Quiz
	10/21/19	10/22/19	Ch 23 - Gynecologic	McDonald	Ch 23 Quiz
			Emergencies		Mid-Term
					Exam
	Wed	Thu	Skills practice	OKeefe,	
	10/23/19	10/24/19	Routine individual academic	McDonald	
			counseling with all students to		
0	M	T	evaluate affective domain	OV f-	C1- 24 O:-
9	Mon 10/28/19	Tue 10/29/19	Ch 25 Planding	OKeefe, McDonald	Ch 24 Quiz Ch 25 Quiz
	Wed	Thu	Ch 25 - Bleeding Ch 26 - Soft-Tissue Injuries	OKeefe,	Ch 26 Quiz
	10/30/19	10/31/19	Ch 27 - Face and Neck Injuries	McDonald	Ch 27 Quiz
	Sat & Sun		NAEMT PreHospital Trauma	Young,	PHTLS Test
	11/2/19 - 1		Life Support Course	Becker	
10	Mon	Tue	Ch 28 - Head and Spine Injuries	OKeefe,	Ch 28 Quiz
	11/4/19	11/5/19	1 3	McDonald	
	Wed	Thu	Ch 29 - Chest Injuries	OKeefe,	Ch 29 Quiz
	11/6/19	11/7/19	Ch 30 - Abdominal and	McDonald	Ch 30 Quiz
			Genitourinary Injuries		
11	Mon	Tue	No class (Veteran's Day)		

Week	M/W Date	T/T Date	Description	Instructor	Tests and Exams
	11/11/19	11/12/19			
	Wed 11/13/19	Thu 11/14/19	Ch 31 - Orthopaedic Injuries Ch 32 - Environmental Emergencies	OKeefe, McDonald	Ch 31 Quiz Ch 32 Quiz
	Sat 11/16/19		Cox Air Care Landing Zone Class	Elsey	
12	Mon 11/18/19	Tue 11/19/19	Trauma Skills	OKeefe, McDonald	
	Wed 11/20/19	Thu 11/21/19	Ch 33 - Obstetrics and Neonatal Care	OKeefe, McDonald	Ch 33 Quiz
13	Mon 11/25/19	Tue 11/26/19	Ch 34 - Pediatric Emergencies	OKeefe, McDonald	Ch 34 Quiz
	Wed 11/27/19	Thu 11/28/19	No class (Thanksgiving)		
	Sat & Sun 11/30/19 -		Safety Seminar	Flynn, Becker	Safety Test EVOS Test
14	Mon 12/2/19	Tue 12/3/19	Ch 35 - Geriatric Emergencies Ch 36 - Patients With Special Challenges	OKeefe, McDonald	Ch 35 Quiz Ch 36 Quiz
	Wed 12/4/19	Thu 12/5/19	Ch 37 - Transport Operations Ch 38 - Vehicle Extrication and Special Rescue	OKeefe, McDonald	Ch 37 Quiz Ch 38 Quiz
15	Mon 12/9/19	Tue 12/10/19	Ch 39 - Incident Management	OKeefe, McDonald	Ch 39 Quiz NIMS 100 & 700 HM Aware MO Class E DL
	Wed 12/11/19	Thu 12/12/19	Ch 40 - Terrorism Response and Disaster Management Ch 41 - A Team Approach to Health Care	OKeefe, McDonald	Ch 40 Quiz Ch 41 Quiz
	Sat 12/14/19			OKeefe, McDonald	Final Practical Exam
16	Mon 12/16/19	Tue 12/17/19	Test Review	OKeefe, McDonald	
	Wed 12/18/19	Thu 12/19/19	Routine individual academic counseling with all students to evaluate affective domain	OKeefe, McDonald	Final Exam
	Fri 12/20/19		EMT and Paramedic graduation ceremony		

Sub-Section 3.350.80 - EMS 306 (EMT Field Experience) Course

Five (5) college credit hours - 72 contact hours.

This course provides an opportunity for students to apply classroom knowledge to reallife situations and patients. Included in this course are all the components of the EMT curriculum as applied to

If the minimum number of patient contacts listed in Sub-Section 3.350.72 - EMT Academy Clinical Requirements (page 122) are not completed by the end of the minimum hours required, additional hours must be scheduled to meet the contact requirements. All hour and patient contact requirements are due by the end of the trimester following the end of the classroom portion of the course.

CMH EMERGENCY ROOM:

- Prerequisites:
 - Successful completion of AHA BLS CPR and
 - Completion of Patient Assessment lecture and quiz.
- EMT students will shadow ER Tech.
- Complete a minimum of 24 hours.

CMH AMBULANCE:

- Prerequisites:
 - Completion of all emergency room clinicals and
 - Completion of Airway Unit Exam.
- EMT students will shadow ambulance EMT.
- Complete a minimum of 48 hours by the final exam.

Sub-Section 3.350.84 - EMT Student Clinical Evaluation Cards

Thank you for being a preceptor for a CMH EMT clinical student.

For the student to get credit for completing this clinical, an evaluation must be completed by you.

Please go to the following link and complete the shift evaluation.

http://ozarksems.com/eval-clinical.php



Student name: Clinical date:		
Time in:	Time out:	
School contact for ex	aposure or other reasons:	

EMR students are to encouraged and allowed to perform the following skills:

- Basic assessments and vitals
- 12-lead acquisition and transmission
- Pharyngeal and blind-insertion airways
- BVM
- Assist with CPAP/BiPAP
- Upper airway suction
- Blood glucose monitoring
- Oxygen, oral glucose, and aspirin administration
- Manual fracture stabilization and SMR
- Bleeding control

Thank you for being a preceptor for a CMH EMT clinical student.

For the student to get credit for completing this clinical, an evaluation must be completed by you.

Please go to the following link and complete the shift evaluation.

http://ozarksems.com/eval-clinical.php



Time out:	
	Time out:

School contact for exposure or other reasons:

Theron Becker 417-597-3688

EMR students are to encouraged and allowed to perform the following skills:

- Basic assessments and vitals
- 12-lead acquisition and transmission
- Pharyngeal and blindinsertion airways
- BVM
- Assist with CPAP/BiPAP
- Upper airway suction
- Blood glucose monitoring
- Oxygen, oral glucose, and aspirin administration
- Manual fracture stabilization and SMR
- Bleeding control

Sub-Section 3.350.88 - EMT Academy Chapter Grade Entry Form

Chapter completion date:				
Chapter completion time:				
Chapter number and name:				
Lead instructor name:				
Student name		Chapter score		
	•			

Lead instructor signature:

Sub-Section 3.350.92 - EMT Academy Terminal Competency Form

Citizens Memorial Hospital - Emergency Medical Services Education Department hereby certifies that the candidate listed below has successfully completed all the terminal competencies required for graduation from the EMT education program as a minimally competent, entry-level EMT and as such is eligible for State and National Certification written and practical examination in accordance with our published policies and procedures.

Name of graduate:
Graduate email:
Completed written examinations: Passing overall score (80% min) Practical skill sheets (includes all required skill sheets) Clinical tracking records Hours tracking report attached Platinum skills tracking report attached Affective learning domain evaluations Student counseling (as applicable) Notes:
Required course certifications: AHA BLS BEMS skills verification form completed (https://health.mo.gov/safety/ems/pdf/TrainingEntityEMT-BSkillsVerification.pdf)
Program requirements successfully and fully completed on:
Medical Director signature:
Program Director signature:
After graduation outcomes are entered in the academy student database as progress is made by the student.
☐ Calendar reminder set to send surveys six (6) months after state licensure. ☐ Date:

Section 3.420 - AEMT Academy



Currently, no AEMT program exists.

According to the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP), the following is the description of the Advanced Emergency Medical Technician:

The primary focus of the Advanced Emergency Medical Technician is to provide basic and limited advanced emergency medical care and transportation for critical and emergent patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide patient care and transportation. Advanced Emergency Medical Technicians function as part of a comprehensive EMS response, under medical oversight. Advanced Emergency Medical Technicians perform interventions with the basic and advanced equipment typically found on an ambulance. The Advanced Emergency Medical Technician is a link from the scene to the emergency health care system.

Sub-Section 3.420.33 - EMS 401 (Advanced Emergency Medical Technician) Course

This is a placeholder for course information.

Sub-Section 3.420.66 - EMS 406 (AEMT Field Experience) Course

This is a placeholder for course information.

Section 3.490 - Paramedic Academy



This section serves as the course syllabus for the Paramedic Academy. A maximum of 14 students will be accepted into each Paramedic Academy.

Sub-Section 3.490.02 - Paramedic Academy Goal

CMH EMS Paramedic Academy goal is "To prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains with or without exit points at the Advanced Emergency Medical Technician and/or Emergency Medical Technician, and/or Emergency Medical Responder levels." (This verbatim language is required by 2015 CAAHEP Standard 11.C). Our program does not include exit points at EMR, EMT, or AEMT levels.

DESCRIPTION

According to the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP), the following is the description of the Paramedic:

The Paramedic is an allied health professional whose primary focus is to provide advanced emergency medical care for critical and emergent patients who access the emergency medical system. This individual possesses the complex knowledge and skills necessary to provide patient care and transportation. Paramedics function as part of a comprehensive EMS response, under medical oversight. Paramedics perform interventions with the basic and advanced equipment typically found on an ambulance. The Paramedic is a link from the scene into the health care system.

LIFE CHANGES DURING THE ACADEMY

Paramedics are highly trained and extremely important members of the allied healthcare team caring for the critically ill or injured. This is a highly demanding 18- to 24-month study that provides students the opportunity to acquire the knowledge and master the skills necessary to enter the workforce as a competent entry-level paramedic. Didactic portions of the course are taught at CMH EMS Headquarters with clinical time at CMH and other various clinical sites.

During this academy, students are highly encouraged not to make any other large life changes (i.e. get married, get divorced, move residences, change jobs, etc.). Additionally, in order to have enough time to prepare for and complete all requirements of the academy, a maximum work load of 24 hours per week is recommended. If the student's overall score is less than 80%, the recommended work load is reduced to 12 hours and further reduced to zero hours if the overall score is less than 70%.

Sub-Section 3.490.04 - Paramedic Academy Accreditation

The following is verbatim from Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) Policies and Procedures as required:

The Citizens Memorial Hospital Paramedic Program holds a Letter of Review, which is NOT a CAAHEP accreditation status, but is a status granted by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) signifying that a program seeking initial accreditation has demonstrated sufficient compliance with the accreditation Standards through the Letter of Review Self Study Report (LSSR) and other documentation. However, it is NOT a guarantee of eventual accreditation.

Students are eligible to test for licensure who begin class with a program and successfully graduate from a program that holds a letter of review or fully accredited and that program subsequently does not gain accreditation or loses accreditation.

Sub-Section 3.490.06 - Paramedic Academy Faculty

MEDICAL DIRECTOR

Tony Cauchi, MD is a board certified emergency medicine physician. Dr. Cauchi attended medical school at Texas Tech University and completed his internship and residency at Michigan State University. He is currently the Chief Medical Officer for Triad Physician Solutions, a physician in the US Army, and the medical director for Citizens Memorial Hospital Emergency Room.



PROGRAM DIRECTOR

Theron Becker, MMPA, EFO, BS-FPE, NRP is a Nationally Registered Paramedic. Mr. Becker is the Director of the EMS Education Department at Citizens Memorial Hospital. Theron got his EMT license in 1995 while attending the Fire Engineering program at Oklahoma State University. Since then, he has obtained a Master degree in public administration management and Executive Fire Officer from the National Fire Academy.



Theron has been a volunteer firefighter since he was 16 years old in SW Missouri and has been employed on hazmat teams, as a fire protection engineer, and in public health in bioterrorism preparedness.

Full bio and curriculum vitae can be found here: http://ozarksems.com/theron-resume.php

A&P I INSTRUCTOR

Lucinda Schmidt is the Nursing Faculty Mentor and Anatomy and Physiology I instructor at Bolivar Technical College. She also teaches Maternal-Child Obstetrics, Fundamentals of Nursing, and Microbiology.

Mrs. Schmidt has a background as a Labor and Delivery nurse along with immunization nurse.



A&P II INSTRUCTOR

Dr. William Gray, DVM is vice president of the board of directors for Texas County Technical Institute. He is also an educator specializing in Anatomy & Physiology, Chemistry, Pharmacology, Biology, Microbiology, and Human Nutrition.



Dr. Gray has an extensive background as faculty instructing Anatomy & Physiology for Bolivar Technical College, Texas County Technical College, Houston High School, Drury University, Missouri State University, and Southwest Baptist University.

Sub-Section 3.490.08 - Paramedic Academy Curriculum Purpose

Provide specialty core and support courses to ensure the achievement of program goals and learning domains and to meet or exceed the content and competency demands of the latest edition of the Paramedic Education Standards.

Sub-Section 3.490.10 - Paramedic Academy Curriculum

The paramedic program will use the National EMS Education Standards.

Specifically, the current edition curriculum and textbooks from AAOS (published by Jones and Bartlett) will be utilized for paramedic courses.

Books included with tuition:

- The current edition of the textbook is "Nancy Caroline's Emergency Care in the Streets 8th Edition" with "Navigate 2 Advantage Package."
- ISBN: 9781284457025
- Textbook for Anatomy and Physiology courses includes, "Anatomy & Physiology 10th Edition."
- ISBN: 9780323528900
- Textbook for Cardiology units includes, "12-Lead ECG The Art of Interpretation 2nd Edition."
- ISBN: 9780763773519
- Reference guide for ACLS and PALS includes, "AHA 2015 Handbook of Emergency Cardiovascular Care for Healthcare Providers."
- Textbook for ACLS course includes, "AHA Advanced Cardiovascular Life Support Provider Manual."
- Textbook for PALS course includes, "AHA Pediatric Advanced Life Support Provider Manual."

Books available for checkout during Academy:

- "Publication Manual of the American Psychological Association."
- Library of more than 700 reference books can be browsed and checked out by visiting http://ozarksems.com/library.php















Sub-Section 3.490.12 - Paramedic Academy Prerequisites

Students must complete the following before completing the first day of class:

- Have regular access to a personal computer with reliable internet access and some type of word processing software.
- Must have a high school diploma, GED, or equivalent.
- Will be at least 18 years old before scheduled clinical time.
- Complete application process (including application fee, entrance exam, and acceptance into the program).
- Verify vaccinations:
 - Two-step tuberculosis (TB) screening,
 - Diphtheria and tetanus (TDAP),
 - Measles, mumps, and rubella (MMR),
 - Hepatitis B,
 - And seasonal influenza. Annual influenza vaccinations will be required throughout the Paramedic Academy.
- Ability to obtain Missouri Class E Driver License.
- Completion of student ID process at CMH HR (certification of insurance application, HIPAA video, and criminal background check).
 - Must not have a criminal background of felonies or drug-related convictions.
 - Must have the ability to pass a drug screen.
- Must have completed NIMS 100 and NIMS 700.
- Must be currently certified in American Heart Association Basic Life Support CPR and maintain certification until completion of the Paramedic Academy.
- Must currently hold an undisciplined Missouri Emergency Medical Technician license and must maintain licensure until completion of the Paramedic Academy.
 - Must have one year of work experience full-time as an EMT.
 - OR must have two years of work experience part-time, PRN, or volunteer as an EMT.
 - OR must have recommendation in writing by the head of department or current employer.
 - Ability to meet functional requirements of paramedic job responsibilities.

Sub-Section 3.490.14 - Paramedic Academy Functional Abilities Required

CMH EMS Department does not discriminate against any individual with disabilities. However, there are certain technical standards, essential functions, and physical demands which are required of the paramedic. The physical requirements are listed below and the student must be able to perform these requirements as well as have satisfactory physical health. NOTE: Additional requirements are often required by employers to those listed below

Students must be able to achieve all clinical objectives, and below items in the list of functional abilities, which are an inherent part of the clinical objectives. Students returning to school following an illness or injury must submit a letter from his or her doctor indicating any restrictions. Situations with a student placed on restrictions from a doctor will be considered on a case-by-case basis. Determination will then be made after evaluation of the restriction and time frame indicated by the doctor regarding the student's ability to meet all clinical objectives and remain in the academy.

- Gross motor skills: Move within confined spaces, sit and maintain balance, stand and maintain balance, reach above shoulders (i.e. hang an IV bag), and reach below waist (i.e. plug an electrical plug into an outlet).
- Fine motor skills: Pick up objects with hands, grasp small objects with hands, write with pen or pencil, type on a computer keyboard, pinch and pick or otherwise work with fingers (i.e. manipulate a syringe), twist (i.e. turn knob), squeeze with fingers (i.e. eye dropper), and able to safely operate a motor vehicle (i.e. an ambulance).
- Physical endurance: Stand (i.e. at patient side during a procedure), sustain repetitive movements (i.e. CPR compressions), and maintain physical tolerance (i.e. assist a patient walking).
- Physical strength: Push and pull 50 pounds (i.e. position patients), support 50 pounds of weight (i.e. ambulate a patient), lift 50 pounds (i.e. pick up a child), move 50 pound objects (i.e. transfer a patient), defend against combative patient, carry equipment and supplies, use upper body strength (i.e. physically restrain a patient), and squeeze with hands (i.e. operate a fire extinguisher).
- Mobility: Twist, bend, stoop, squat, move quickly (i.e. in response to an emergency), climb (i.e. ladders), and walk.
- Hearing: Hear normal speaking levels (i.e. person-to-person report), hear faint voices, hear faint body sounds (i.e. blood pressure), hear in situations when not able to see lips, hear auditory alarms.
- Visual: See objects at arms-length (i.e. computer screen), see objects around 20 feet away (i.e. patient in a room), see objects more than 20 feet away (i.e. obstacles on the roadway), use depth perception, use peripheral vision, distinguish color (i.e. color codes on equipment), distinguish color intensity (i.e. skin color).
- Tactile: Feel vibrations (i.e. palpate pulse), detect temperature (i.e. skin), feel differences in surface characteristics (i.e. skin turgor), feel differences in sizes and shapes (i.e. palpate vein), and detect environmental temperature (i.e. check for drafts).
- Smell: Detect odors from patient (i.e. alcohol breath), detect smoke, and detect gases or noxious smells.
- Reading: Read and understand written documents (i.e. protocols).

- Arithmetic competence: Read and understand columns of writing (i.e. charts), read digital displays, read graphics (i.e. EKG), calibrate equipment, convert numbers to and from metric system, tell time, measure time (i.e. count duration of contractions), count rates (i.e. breaths per minute), use measuring tools (i.e. thermometer), read measurement marks (i.e. scales), add/subtract/multiply/divide whole numbers, compute fractions (i.e. medication dosages), use a calculator, and write numbers.
- Emotional stability: Establish therapeutic boundaries, provide patients with emotional support, adapt to changing environments and stress, deal with the unexpected (i.e. patient crisis), focus attention on task, monitor own emotions, perform multiple responsibilities concurrently, and handle strong emotions (i.e. grief).
- Analytical thinking: Transfer knowledge from one situation to another, process information, evaluate outcomes, problem solve, prioritize tasks, use long-term memory, and use short-term memory.
- Critical thinking: Identify cause and effect relationships, plan and control activities for others, synthesize knowledge and skills, and sequence information.
- Interpersonal skills: Negotiate interpersonal conflict, respect differences in patients and co-workers, and establish rapport with patients and co-workers.
- Communication skills: Teach (i.e. patient education), explain procedures, give oral reports, interact with others, communicate on the telephone, communicate on a radio, influence people, direct activities of others, convey information through writing.

Sub-Section 3.490.16 - Paramedic Academy Tuition Details

Tuition of \$7,500 includes textbooks, online access codes, polo shirts (2), and testing fees (re-testing fees are not included). Application deadline is at least four weeks before class start date. A non-refundable application fee of \$100 is due at time of application. Fees and tuition can be paid by check, credit card, or CMH employee payroll deduction. If paying by credit card, an additional 2.5% will be required to cover added expenses by credit card companies.

A payment schedule is available with the following amounts and deadlines:

- \$2,000 is due by the first day of class.
- An additional \$2,000 is due before the first trimester final exam can be taken.
- An additional \$2,500 is due before the second trimester final exam can be taken.
- The final \$1,000 is due before the third trimester final exam can be taken.

A&P TRANSFER CREDIT TUITION DETAILS

If an approved Anatomy and Physiology I class has already been attended (contact the EMS Education Director for approval), the total tuition will be \$6,500 with the following payment schedule:

- \$2,000 is due by the first day of class.
- An additional \$1,000 is due before the first trimester final exam can be taken.
- An additional \$2,500 is due before the second trimester final exam can be taken.
- The final \$1,000 is due before the third trimester final exam can be taken.

If an approved Anatomy and Physiology I class and Anatomy and Physiology II class have already been attended (contact the EMS Education Director for approval), the total tuition will be \$5,500 with the following payment schedule:

- \$2,000 is due by the first day of class.
- An additional \$1,000 is due before the first trimester final exam can be taken.
- An additional \$1,500 is due before the second trimester final exam can be taken.
- The final \$1,000 is due before the third trimester final exam can be taken.

<u>Sub-Section 3.490.18 - Chris Loderhose Memorial Paramedic Academy Work-Study</u> Program

Each trimester, each of the following individuals can sponsor one (1) student in the work-study program:

- CMH EMS Director
- CMH EMS Education Director
- Each CMH EMS Manager

An official enrollment must be received by the EMS Education Director before the start of each trimester of the Paramedic Academy. All application, entrance, and enrollment requirements must be met by deadlines provided; however, tuition fees will be reduced according to the work contract.

Only students with an overall Paramedic Academy grade greater than 80% and in good standing with laboratory and clinical requirements are eligible to participate in the work-study program. If the overall course grade drops below 80% or the student falls behind on laboratory or clinical requirements, the student will be removed from work-study program for the remainder of trimester and tuition fees will be pro-rated based on the portion of the work contract completed.

Award selection criteria is based on a point system. The student applicants with a sponsor and with the highest points will be awarded the work-study opportunity.

WORK-STUDY APPLICATION:

Student name:	Apply for year/ trimester:
I attest that I meet the following qualifications (sel	ect all that apply):
I currently have an overall course grade of at leminimum grade throughout the trimester. [mandatory]	east 80% and will maintain that
I am currently at the suggested milestone in regrequirements. [mandatory]	gards to laboratory and clinical
I have read the obituary for Chris Loderhose ar Chris's memory through being an EMS profess [mandatory]	
My household income falls within the pre-tax, one or both of the programs below. Verification Household size:	
 Missouri Food Stamps (https://mydss.mo.g program/income-limits) [10 points] Missouri WIC (https://health.mo.gov/living [5 points] 	-
I am currently an active volunteer emergency r Agency:	esponder in my community.
Chief Signature: [2 points] I am currently an employee of Citizens Memor	rial Hospital.
[5 points] I intend to work at CMH as a paramedic after g [1 point]	graduation.
Student signature:	

CHRISTOPHER ALLEN LODERHOSE OBITUARY (AUG 22, 1968 - MAY 19, 2018):



Christopher Allen Loderhose, 49, went to be with his Lord on Saturday, May 19, 2018. He was born on Thursday, August 22, 1968 in Middleton, NY to Jean Marie Morse and Peter Hones Loderhose.

Chris moved to Springfield with his family in 1982 from Walden, NY. Chris attended Central High School, was on the wrestling team and graduated in 86'. It was here in 1983 that he met a young lady by the name of Michelle Climer. Chris and Michelle dated through high school. On June 10, 1988 they were united in marriage and to this union three children were born. Chris was saved during a service at the Westport Assembly of God when he was 18. Shortly after, he enrolled at Central Bible College and graduated in 1992. Chris attended CBC four years and also worked as a Youth Pastor, Pastor and in the transportation business before becoming a Paramedic.

Being a paramedic was his true calling. Chris loved helping others, from Pastoring, to transportation, from transportation to EMS, his desire was to show others Christ. Chris worked for CMH as a paramedic and as the Cedar County Manager from 2011 to 2014. He worked the last four years at Cox Health, saving lives while fighting for his own.

Chris "Poppy" loved his children and grandchildren. He had the opportunity to visit his grandchildren in Beaufort, SC and later in Okinawa, Japan while Cavin served in the U.S. Marines. Chris passed from colorectal cancer and was a strong advocate for early screening.

"I have fought the good fight, I have finished the race, I have kept the faith. Finally, there is laid up for me the crown of righteousness, which the Lord, the righteous Judge, will give to me on that Day, and not to me only but also to all who have loved His appearing"

Tuition will be reduced at a rate of \$10 per hour worked. For example, if the student is six hours per week for 15 weeks, the tuition due that trimester will be reduced by \$900 imum tuition reduction is the amount of tuition due that trimester. Description of work (In general, work should be of a clerical, cleaning, or other nistrative-type activity. At no time may a work-study student be substituted for EMT or nedic staff. During work-study activities, the student must wear the student uniform and I-issued student ID badge and may not perform their normal work duties or study ities.):		WORK-STUDY PROGRAM CONTRACT:
End date (max 15 weeks after the start): (note: No work study is to be done during finals week) Number of work hours per week (maximum of 12 hours per week): Tuition will be reduced at a rate of \$10 per hour worked. For example, if the student s six hours per week for 15 weeks, the tuition due that trimester will be reduced by \$900 imum tuition reduction is the amount of tuition due that trimester. Description of work (In general, work should be of a clerical, cleaning, or other nistrative-type activity. At no time may a work-study student be substituted for EMT or nedic staff. During work-study activities, the student must wear the student uniform and I-issued student ID badge and may not perform their normal work duties or study ities.):		Student name:
(note: No work study is to be done during finals week) Number of work hours per week (maximum of 12 hours per week): Tuition will be reduced at a rate of \$10 per hour worked. For example, if the student is six hours per week for 15 weeks, the tuition due that trimester will be reduced by \$900 mum tuition reduction is the amount of tuition due that trimester. Description of work (In general, work should be of a clerical, cleaning, or other nistrative-type activity. At no time may a work-study student be substituted for EMT or nedic staff. During work-study activities, the student must wear the student uniform and I-issued student ID badge and may not perform their normal work duties or study ities.):		Start date (trimester start):
Number of work hours per week (maximum of 12 hours per week): Tuition will be reduced at a rate of \$10 per hour worked. For example, if the student is six hours per week for 15 weeks, the tuition due that trimester will be reduced by \$900 mum tuition reduction is the amount of tuition due that trimester. Description of work (In general, work should be of a clerical, cleaning, or other inistrative-type activity. At no time may a work-study student be substituted for EMT or medic staff. During work-study activities, the student must wear the student uniform and i-issued student ID badge and may not perform their normal work duties or study ities.):		End date (max 15 weeks after the start):
Tuition will be reduced at a rate of \$10 per hour worked. For example, if the student is six hours per week for 15 weeks, the tuition due that trimester will be reduced by \$900 imum tuition reduction is the amount of tuition due that trimester. Description of work (In general, work should be of a clerical, cleaning, or other nistrative-type activity. At no time may a work-study student be substituted for EMT or nedic staff. During work-study activities, the student must wear the student uniform and I-issued student ID badge and may not perform their normal work duties or study ities.):		(note: No work study is to be done during finals week)
ss six hours per week for 15 weeks, the tuition due that trimester will be reduced by \$900 mum tuition reduction is the amount of tuition due that trimester. Description of work (In general, work should be of a clerical, cleaning, or other mistrative-type activity. At no time may a work-study student be substituted for EMT or medic staff. During work-study activities, the student must wear the student uniform and I-issued student ID badge and may not perform their normal work duties or study ities.):		Number of work hours per week (maximum of 12 hours per week):
nistrative-type activity. At no time may a work-study student be substituted for EMT or nedic staff. During work-study activities, the student must wear the student uniform and I-issued student ID badge and may not perform their normal work duties or study ities.):		six hours per week for 15 weeks, the tuition due that trimester will be reduced by \$900.
	ne I-i	strative-type activity. At no time may a work-study student be substituted for EMT or edic staff. During work-study activities, the student must wear the student uniform and ssued student ID badge and may not perform their normal work duties or study
Student signature:	111	es.):
Student signature:		
CHUNCH SPRIGHTA.		Student signature:
		Program director signature:

Sub-Section 3.490.20 - Paramedic Academy Application and Selection Process

CMH EMS Education Department will review completed student applications. Upon meeting minimum admission standards, or higher, qualified applicants will be offered a seat in the Paramedic Academy in the following priority:

- CMH employee.
- First responder agency within CMH's seven-county service area.
- Currently working full-time for an ambulance agency.
- Highest entrance exam score (if applicable).

If the number of applicants exceeds classroom capacity, an entrance exam will be used to select and admit prospective paramedic students with the best chances of success in the Paramedic Academy. It is also used as a diagnostic tool to assess the incoming students' strengths and weaknesses.

Sub-Section 3.490.22 - Paramedic Academy Experiential Learning

Credit for experiential learning, advanced placement, or transfer of credits from another institution will not be offered or provided other than those specifically indicated in one of the following sections:

- Sub-Section 3.490.24 Paramedic Academy Military Advanced Placement (page 149).
- Sub-Section 3.490.26 Paramedic Academy Registered Nurse Advanced Placement (page 151)
- Sub-Section 3.490.28 Non-Accredited Paramedic Graduate Advanced Placement (page 152).
- Sub-Section 3.490.30 Paramedic Academy Anatomy and Physiology Transfer Credit (page 152).
- Sub-Section 3.490.32 Paramedic Academy Retake Advanced Placement (page 153).
- Minor certificates that have previously been completed may be used in lieu of attending those specific classes again. Case-by-case approval must be attained and certificates provided prior to the class in question. Additionally, if the course has a post-test, you must repeat the post-test with the rest of the class and that test score will be used. Examples include, but not limited to:
 - AHA courses.
 - NAEMT courses,
 - NIMS courses,
 - NIHSS course,
 - Etc.

Sub-Section 3.490.24 - Paramedic Academy Military Advanced Placement

In accordance with Missouri Regulations 19 CSR 30-40.331 and 19 CSR 30-40.342, CMH will provide advanced placement into the Paramedic Academy for active duty and honorably discharged military personnel. The intent of these regulatory changes is to provide recognition of the EMS training and experience obtained during military service.

Advanced placement consideration is available to all active duty or honorably discharged personnel of all branches of the Armed Forces including the National Guard and Reserves.

To take advantage of these provisions, the individual must be currently licensed as an EMT in the state of Missouri. Refer the Missouri Bureau of EMS website (http://health.mo.gov/safety/ems). Missouri BEMS requires licensure within two (2) years after honorable discharge or during active duty.

Once accepted into CMH Paramedic Academy, your EMS knowledge, skills, and abilities may be assessed for advanced placement. Assessment is not required for the following Military Occupational Specialties:

ARMY HEALTH CARE SPECIALIST (MOS 68W) LEVEL I

Full tuition is required. The following ALS skills are expected:

- IM/SQ medication administration (four lab skills and two live skills will be added to the skills tracker)
- IV access and medication administration (12 IV lab skills and 4 IO lab skills will be added to the skills tracker)
- IV blood draw
- Nebulizer medication administration (two lab skills and two live skills will be added to the skills tracker)
- Needle chest decompression (four lab skills will be added to the skills tracker)
- OG tube placement
- Surgical cricothyrotomy (six lab skills will be added to the skills tracker)

Advanced placement with this specialty includes the following:

- Laboratory Requirements:
 - IV laboratory sessions are not required.
 - Many of the trauma laboratory sessions may not be required, but they are encouraged.
- Clinical Requirements:
 - The requirement for 25 IV starts is waived.
 - The requirement for 20 medication administrations is waived.
 - Same-day surgery clinical experience is not required, but is encouraged.

ARMY HEALTH CARE SPECIALIST (MOS 68W) LEVEL II

Full tuition is required. The following ALS skills are expected:

• All those listed for Army Health Care Specialist (MOS 68W) Level I.

Advanced placement with this specialty includes the following:

• All those listed for Army Health Care Specialist (MOS 68W) Level I.

ARMY HEALTHCARE SPECIALIST (MOS 68W) LEVEL III

Full tuition is required. The following ALS skills are expected:

- All those listed for Army Health Care Specialist (MOS 68W) Level II
- ET Intubation

Advanced placement with this specialty includes the following:

- All those listed for Army Health Care Specialist (MOS 68W) Level II
- Laboratory Requirements:
 - Airway laboratory sessions are not required.
- Clinical Requirements:
 - The requirement for airway management skills are waived. All of the live human intubations are still required.

Sub-Section 3.490.26 - Paramedic Academy Registered Nurse Advanced Placement

In accordance with Missouri Bureau of Emergency Medical Services (BEMS) interpretation, CMH will provide advanced placement into the Paramedic Academy for Registered Nurses. Students must complete the following:

- Have a current, undisciplined Missouri EMT License.
- Have a current, undisciplined Missouri Registered Nurse License.
- Submit a letter of support to Missouri BEMS and receive approval.
- Complete application process as described in Sub-Section 3.490.20 Paramedic Academy Application and Selection Process (page 148).

Upon acceptance into the program, the final written and practical exams will be completed. A gap analysis will be completed to address areas needed for paramedic proficiency. An individual learning plan will be created based on that gap analysis that will include the following areas:

- Cognitive knowledge required and classroom education scheduled.
- Psychomotor knowledge and abilities required and laboratory and simulation education scheduled.
- Affective knowledge and abilities required and clinical experience scheduled.

In all cases, all trimester Mid-Term and Final Exams and the final written and psychomotor exams must be successfully completed. Finally, all candidates must successfully complete all requirements of Sub-Section 3.490.66 - EMS 526 (Paramedic Field Experience) Course (page 203) and Sub-Section 3.490.70 - EMS 536 (Paramedic Field Internship) Course (page 206) must be completed before being eligible to test for National Registry testing. Adjustments to tuition requirements will also be made based on the results of the gap analysis.

Sub-Section 3.490.28 - Non-Accredited Paramedic Graduate Advanced Placement

Currently licensed paramedics from a non-accredited school may apply for advanced placement into the Paramedic Academy. Students must complete the following:

- Have a current, undisciplined Missouri Paramedic License.
- Complete application process as described in Sub-Section 3.490.20 Paramedic Academy Application and Selection Process (page 148).

Upon acceptance into the program, the final written and practical exams will be completed. A gap analysis will be completed to address areas needed for paramedic proficiency. An individual learning plan will be created based on that gap analysis that will include the following areas:

- Cognitive knowledge required and classroom education scheduled.
- Psychomotor knowledge and abilities required and laboratory and simulation education scheduled.
- Affective knowledge and abilities required and clinical experience scheduled.

In all cases, all trimester Mid-Term and Final Exams and the final written and psychomotor exams must be successfully completed. Finally, all candidates must successfully complete all requirements of Sub-Section 3.490.66 - EMS 526 (Paramedic Field Experience) Course (page 203) and Sub-Section 3.490.70 - EMS 536 (Paramedic Field Internship) Course (page 206) must be completed before being eligible to test for National Registry testing. Adjustments to tuition requirements will also be made based on the results of the gap analysis.

Sub-Section 3.490.30 - Paramedic Academy Anatomy and Physiology Transfer Credit

Anatomy and Physiology courses taken at an accredited college or university may be transferred into the Paramedic Academy in lieu of repeating the program's Anatomy and Physiology components. To have your credits evaluated, contact Bolivar Technical College at 417-777-5062. Courses considered for possible transfer must have a minimum grade of "C-"or higher. The Paramedic Academy requires a minimum of eight (8) credit hours or 150 clock hours in Anatomy and Physiology. Partial credit may be evaluated with a minimum of four (4) credit hours or 75 clock hours in Anatomy and Physiology. Transcripts must be submitted before the Paramedic Academy begins for evaluation.

Sub-Section 3.490.32 - Paramedic Academy Retake Advanced Placement

Paramedic Academy students that have failed previous attempts may return into the paramedic academy following this procedure. Students must complete the following:

- Meet all prerequisite requirements.
- Complete application process as described in Sub-Section 3.490.20 Paramedic Academy Application and Selection Process (page 148).

Upon acceptance into the program, the written and practical exams will be completed for all previously completed trimesters where a score of greater than 80% was originally attained. If the retest results are greater than 70%, you do not need to retake the trimester and your previous grade will be used in the new Academy. Tuition will be pro-rated accordingly.

All candidates must successfully complete all requirements of Sub-Section 3.490.66 - EMS 526 (Paramedic Field Experience) Course (page 203) and Sub-Section 3.490.70 - EMS 536 (Paramedic Field Internship) Course (page 206) must be completed before being eligible to test for National Registry testing. Adjustments to tuition requirements will also be made based on the results of the gap analysis.

Sub-Section 3.490.34 - Paramedic Academy Classroom Details

Each trimester is broken into eight (8) modules of two weeks.

- First trimester:
 - First half (eight weeks):
 - Paramedic classroom every Monday 0730 hours to 1730 hours.
 - Paramedic classroom every Thursday 0730 hours to 1730 hours.
 - Second half (eight weeks):
 - Paramedic classroom every other Monday 0730 hours to 1730 hours. The week without a Monday classroom session, students are required to complete at least one clinical shift.
 - Paramedic classroom every Thursday 0730 hours to 1730 hours.
- Second trimester:
 - Paramedic classroom every other Monday 0730 hours to 1730 hours. The week without a Monday classroom session, students are required to complete at least one clinical shift.
 - A&P I Classroom every Thursday 0730 hours to 1230 hours.
 - Paramedic classroom every Thursday 1330 hours to 1730 hours.
- Third trimester:
 - Paramedic classroom every other Monday 0730 hours to 1730 hours. The week without a Monday classroom session, students are required to complete at least one clinical shift.
 - A&P II Classroom every Thursday 0730 hours to 1230 hours.
 - Paramedic classroom every Thursday 1330 hours to 1730 hours.
- Fourth trimester:
 - Students are on their own to schedule and attend the reminder of clinicals, field experience, and field internship shifts.

Coursework, classroom activities, and in-class testing will focus on personal safety, teamwork, and exceptional, compassionate patient care. Extensive use of simulation and scenario education will be included. Additionally, personal work habits and fitness activities will be included to prepare students for a life-long career in EMS.

TRIMESTER, CONTACT, AND CLINICAL HOURS:

Course	Trimester Hours	Classroom Hours	Clinical Hours	Field Experience Hours	Field Internship Hours	Total Hours
EMS 501	16	252				252
EMS 506	5		84			84
First	21	252	84			336
Trimester Total						
BIO 111	4	64				64
EMS 511	14	224				224
EMS 516	10		166			166
Second Trimester Total	28	288	166			454
BIO 211	4	64				64
EMS 521	14	224				224
EMS 526	9			100		100
Third Trimester Total	27	288		100		388
EMS 536	6				150	150
Fourth Trimester Total	6				150	150
Academy Total	82	828	250	100	150	1,328

GENERIC CHAPTER CLASSROOM AND LABORATORY SCHEDULE

The following schedule is used for each chapter classroom and laboratory activities. Some chapters span several class periods and some class periods have multiple chapters. Instructors and students will need to practice flexibility with varied chapter content and guest instructors.

- 1. Each student will have completed the practice chapter quiz found on JBLearning with a passing score of greater than 70% to be allowed to attend class.
- 2. Case study: The chapter case study is presented to develop classroom discussion.
- 3. Chapter lecture. This involves highlights from the reading assignment, tips and tricks from the field, and guest lecturers. Student-led impromptu lecture based on student questions is also included.
- 4. Next Pharmacology Review: Instructor-led impromptu lecture based on the list of medications to be tested on the next class date. This lecture will contain heavy discussion on represented protocols as they apply to these medications.
- 5. Skills lab: Specific skills associated with the lecture will be reviewed, practiced, and tested. Observation, practice, and refinement of individual skills on manikins and fellow students.
- 6. Pharmacology Quiz: Assigned medication(s) and/or random medication(s) that have already been quizzed. This activity makes up 25% of the chapter grade.
- 7. EKG Quiz: A random EKG will be selected and must be interpreted. This activity makes up 25% of the chapter grade.
- 8. Simulation Lab: The on-duty student team manages a simulation scenario developed by their peers based on an actual call and patient. Other students play as actors or patients, evaluate the team, or observe as assigned.
- 9. Simulation Review: Directly after the scenario, the entire class reviews the scenario. The on-duty team critiques themselves first, followed by the instructor, and then the entire class. Instructor-led impromptu lecture based on street and real-life experience.

Sub-Section 3.490.36 - Paramedic Academy Applied Research Project

Each student will be required to complete an applied research project. This project will equip students with the ability to problem solve, conduct EMS research, and present solutions to supervisors. These skills are critical to promote evidence-based change in the EMS profession.

The Applied Research Project is to be completed using correct APA citations, spelling, grammar, and punctuation. Each of the three phases are to be completed during each trimester. Specific details can be found in the appropriate course description.

- Part one Describe the problem and perform a literature review.
- Part two Generate new and original research data and describe results.
- Part three Using parts one and two, develop recommendations and present findings.

Resources can be found in numerous locations and details will be provided in class. Sources available from CMH EMS:

• Physical reference library. Online card catalog can be found here: https://www.librarycat.org/lib/cmh ems



• Online EMS research article database can be found here: http://ozarksems.com/research.php



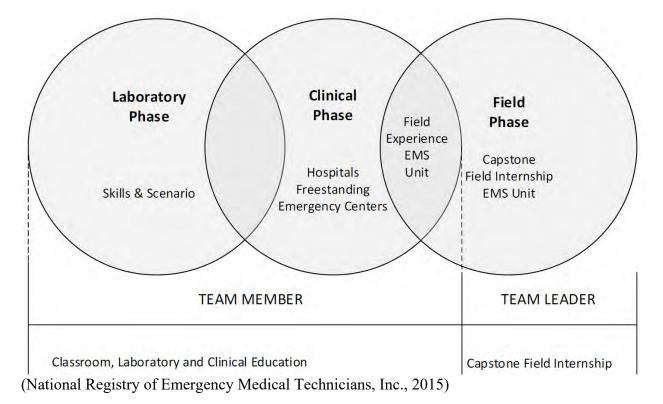
Sub-Section 3.490.38 - Paramedic Academy Academic Progress

To remain in and progress through the Paramedic Academy, the student must:

- Remain in compliance with policies and procedures outlined in this administration manual.
- Maintain CPR certification and MO EMT licensure.
- Submit to annual influenza immunization.

Students are responsible to constantly monitor his or her own learning process. Current standing and grades are available upon request. Every effort will be made to email grade records at the completion of each chapter.

Students are strongly encouraged to request appropriate faculty guidance and assistance with any curriculum material or any clinical objectives he or she is having difficulty mastering.



PARAMEDIC ACADEMY COURSE PROGRESS GRAPHIC

Trimester	Mo	First Trimester		Second				Fourth
		Class	Clinia al	Trimest		Class	Clinical	Trimester
		Class	Clinical	Class	Clinical	Class	Clinical	Clinical
1	Jan	EMS 501						Previous
Spring	Feb							Academy
	Mar		EMS 506					
	Apr							
2	May			BIO	EMS			
Summer	Jun			111	516			
	Jul			&				
	Aug			EMS				
				511				
3	Sep					BIO	EMS	
Fall	Oct					211	526	
	Nov					&		
	Dec					EMS		
						521		
4	Jan	Next						EMS 536
Spring	Feb	Academy						
	Mar	•	Next					
	Apr		Academy					

Sub-Section 3.490.40 - Paramedic Academy Grade Calculation

Each chapter score (CHA) is calculated with the following formula. In simple terms, the Platinum post-test is 50% of the chapter score and the combined results of the EKG and Pharmacology quizzes make up the other 50%.

$$CHA = average(PLA, average(EKG, PHA))$$

- CHA = Chapter score
- EKG = EKG quiz
- PHA = Pharmacology quiz
- PLA = Platinum post-test

Each module score (MOD) is calculated with the following formula. If you pass your clinical and affective evaluation, your module score is an average of all the chapter scores in that module. If you do not pass your clinical or your affective evaluation, your module score is zero.

$$MOD = if(and(CLI = "pass", AFF = "pass"), average(CHA), 0)$$

- AFF = Affective score
- CHA = Chapter score
- CLI = Clinical score
- MOD = Module score

Each course score (COU) is calculated with the following formula. In simple terms, if you pass your psychomotor evaluation, your course score is an average of all the module scores in that course. If you do not pass your psychomotor evaluation, your course score is zero.

$$COU = if(PSY = "pass", average(MODs, MTE, FTE, ARP), 0)$$

- ARP = Applied Research Project
- COU = Course score
- FTE = Final trimester exam
- MOD = Module score
- MTE = Mid-trimester exam
- PSY = Psychomotor score

The overall Academy score (ACA) is calculated with the following formula. In simple terms, if you pass your final evaluation, your academy score is an average of all the course scores. If you do not pass your final evaluation, your academy score is zero.

$$ACA = if(FIN = "pass", average(COU), 0)$$

- ACA = Academy score
- FIN = Final evaluation score (includes cognitive, affective, and psychomotor exams after team leads are completed)
- COU = Course score

Sub-Section 3.490.42 - Certifications Gained after Completion of the Paramedic Academy

- American Heart Association (AHA) Advanced Cardiac Life Support (ACLS)
- American Heart Association (AHA) Pediatric Advanced Life Support (PALS)
- Hazmat Medic
- National Association of Emergency Medical Technicians (AMLS) Advanced Medical Life Support
- National Association of Emergency Medical Technicians (NAEMT) All Hazard Disaster Response (AHDR)
- National Association of Emergency Medical Technicians (NAEMT) Geriatric Education for EMS (GEMS)
- National Association of Emergency Medical Technicians (NAEMT) Psychological Trauma in EMS Patients (PTEP)
- National Association of Emergency Medical Technicians (NAEMT) Tactical Emergency Casualty Care (TECC)
- National Fire Administration Q0123 Applied Research
- National Fire Administration Q0170 Data Gathering Instruments to Support Applied Research Projects
- National Incident Management System (NIMS) 200: Incident Command System for Single Resources and Initial Action Incident
- Paramedic course credit may be transferred to colleges where we have articulation agreements. Refer to the program director for the list of colleges.
- Port Access Course
- Prepared and eligible to test for Missouri Licensed Paramedic
- Prepared and eligible to test for Nationally Registered Paramedic

Sub-Section 3.490.44 - Paramedic Academy Examination and Graduation Requirements

To be eligible for state and national testing, the student must meet the following requirements:

- Achieve a cumulative score of no less than 80%.
- Achieve a score of at least 70% on at least 70% of all assignments, chapter quizzes, and unit tests. This is required for each course.
- Attain 70% or higher grade in anatomy and physiology courses at the end of each trimester.
- Attain a "pass" grade in all clinical activities due at the end of each trimester.
- Completion of all assigned tests and exams.
- Successfully complete all clinical minimum hour, patient contact, and skill requirements.
- A "pass" certification on the final cognitive, psychomotor, and affective evaluations which will include practical skills as required by NREMT for this level of licensure.

<u>Sub-Section 3.490.46 - Paramedic Academy Laboratory, Scenario, and Simulation Requirements</u>

DEFINITIONS

<u>Laboratory</u>: This is the class time and activities where individual skills are practiced and evaluated on manikins or peers. This is the first step in skill mastery. For example, paramedic students will use lab time to start IVs on manikin arms and each other.

Scenario: This is the class time and activities where skills are incorporated into a full patient scenario where background, patient, and scene information is presented. The focus is still on the skill, however, scene management and limited decision making is incorporated. For example, an evaluator may present some patient information where an IV is needed and the student will start an IV on a manikin arm or a peer.

Simulation: This is the class time and activities where an entire patient encounter event is simulated in a 20-minute evolution. Students act in teams and will need to manage all aspects of the situation and patient. For example, a simulation might present a patient with chest pain where the student must assess the patient, start an IV and give medication.

SKILL PROGRESSION

Skills will be practiced and mastered in a progression format from basic to advanced. Refer to the table below where the first column of requirements for a particular skill must be completed before moving to the next column. All requirements below for a particular skill must be completed in lab, scenario, or simulation before performing the skill in the clinical setting.

SIMULATION TEAMS

A schedule will be developed where each student team will be responsible for responding to simulated emergencies. These simulated emergencies may occur at any time during the paramedic classroom time. If your team is "on duty" for the day, you will be expected to have the assigned response equipment checked and available before start of class and left in service and available for the next class and next "on duty" team. Teams not "on duty" will be required to participate as patients or actors, serve as peer evaluators, or observe the simulated emergency.

Simulations are written by instructors and peers based on actual call and real patient information. Simulations are validated by the use of actual patient demographics, complaints, vitals, and response to treatments as documented in the ePCR data.

INSTRUCTOR EVALUATIONS

Instructor evaluations also count as peer evaluations. For example, if the IV Therapy Skill requires one (1) peer evaluation and one (1) instructor evaluation and the student obtains two (2) instructor evaluations, the requirements have been met. Additionally, Simulation Evaluations also meet the requirements of Scenario Evaluations.

In general, the first and last evaluations are preferred to be instructor evaluations. If the last evaluation is failed, all previous peer evaluations must be completed by the student and the peer(s) that documented the successful evaluations. In addition to not missing any critical fail criteria, a successful evaluation obtains at least 80% of the possible points on the evaluation form.

LABORATORY AND CLINICAL DOCUMENTATION SOFTWARE

Platinum Planner will be used to document and track skills, labs, scenarios, simulations, and clinical contacts. It is the student's responsibility to complete documentation.

When documenting live patient contacts and skills in Platinum Planner, the first line in the narrative must contain a medical record number trackable to the patient. This could be a hospital number off a face sheet or an EMS run number. Spot checks will be done to ensure accurate documentation.

All documentation in Platinum Planner for lab, scenarios, clinicals, field experience, and field internship MUST be submitted within 48 hours of completing the activity. If documentation is submitted late, it will be rejected and will not count.

PLATINUM PLANNER SIGNUP DIRECTIONS:

- 10. Go to http://platinumed.com and click on "Create student account."
- 11. Complete the form. A course code will be given to you by your instructor.
- 12. Check your email and activate your account following the directions in the email.

LABORATORY SKILL REQUIREMENTS

The table below meets or exceeds CoAEMSP Appendix G requirements.

		Minimum N	umber of Succ	essful Attempts	
GI 'II	Individua	al Lab Skill		Lab Scenario	Simulation
Skill	Peer	Instructor	Peer	Instructor	Instructor
	Evaluator	Evaluator	Evaluator	Evaluator	Evaluator
Abnormal Delivery with Newborn		1	2	4	
Care		1	2	4	
Airway Management	24	1			
Basic - 1 & 2 Rescuer CPR for		1		2	
Adults		1		2	
Basic - 1 & 2 Rescuer CPR for		1		2	
Children		1		L	
Basic - 1 & 2 Rescuer CPR for		1		2	
Infants		1			
Basic - 12-Lead ECG Placement	2			2	
Basic - Automated External		1			
Defibrillator		1			
Basic - Bag-Mask Technique and		1		1	
Rescue Breathing for Adults		1		1	
Basic - Bag-Mask Technique and		1		1	
Rescue Breathing for Children		1		1	
Basic - Glucometer	2				
Basic - Hemorrhage Control	1			2	
Basic - Inhaled Medication	2			2	
Administration	2			<u> </u>	
Basic - Intranasal Medication	2			2	
Administration					
Basic - Joint Splinting	1			2	
Basic - Long Bone Splinting	1			2	
Basic - Relief of Choking in Infants		1		1	
Basic - Relief of Choking in		1		1	
Patients 1 Year of Age and Older		1		1	
Basic - Spinal Immobilization Adult	1			2	
(Seated Patient)	1				
Basic - Spinal Immobilization Adult	1			2	
(Supine Patient)					
Basic - Traction Splinting	1			2	
Comprehensive Normal Physical	1	1			
Assessment - Adult	1	1			
Comprehensive Normal Physical	1	1	2		
Assessment - Pediatric		-			
CPAP and PEEP	1		2	4.5	
Defibrillation	1	1	4	10	
Direct Orotracheal Intubation -	9	1	2		
Adult		-	-		
Direct Orotracheal Intubation -	9	1	2	12	
Pediatric	<u> </u>	*			
Intramuscular Medication		1	1		
Administration					
Intraosseous Infusion	1	1	4	2	
Intravenous Piggyback Infusion	1	1	2		

Individual Lab Skill			Minimum N	umber of Succ	essful Attempts	
Peer Instructor Evaluator Evaluato	Q1-111	Individua	ıl Lab Skill			
Intravenous Therapy	Skill	Peer	Instructor	Peer	Instructor	Instructor
Intravenous Therapy		Evaluator	Evaluator	Evaluator	Evaluator	Evaluator
IV Medication Administration	Intravenous Therapy	1	1			
Medical Including Cardiac Physical Assessment		1	1			
Nasotracheal Intubation - Adult 2						
Needle Cricothyrotomy	Assessment	1	1	2		
Neonatal Resuscitation Beyond Routine Newborn Care 1	Nasotracheal Intubation - Adult	2				
Routine Newborn Care 1	Needle Cricothyrotomy	1	1	4	2	
Rotutine Newborn Care Normal Delivery with Newborn 1	Neonatal Resuscitation Beyond	1		2	4	
Care	Routine Newborn Care	1		2	4	
Care Obtain a Patient History from an Alert and Oriented Patient 1	Normal Delivery with Newborn	1		2	2	
Alert and Oriented Patient	Care	1		2	2	
Alert and Oriented Patient Pathology - Any - Team Member 10	Obtain a Patient History from an	1	1			
Pathology - Team Lead - Cardiac Dysrhythmia - Adult Pathology - Team Lead - Chest Pain - Geriatric Pathology - Team Lead - Delivery with Neonate Resuscitation - Pediatric Pathology - Team Lead - OB/GYN - Adult Pathology - Team Lead - OB/GYN - Adult Pathology - Team Lead - Respiratory Distress - Pediatric 1 Pathology - Team Lead - Sepsis - Geriatric 1 Pathology - Team Lead - Sepsis - Geriatric 1 Pathology - Team Lead - Shock - Adult Pathology - Team Lead - Shock - Adult Pathology - Team Lead - Stroke - Geriatric 1 Pathology - Team Lead - Stroke - Geriatric 1 Pathology - Team Lead - Trauma - Adult Pathology - Team Lead - Trauma - Pediatric 1 Pathology - Team Lead - Trauma - Pediatric 1 2 2 2 Port Access 1 Subcutaneous Medication 1 1 2 2 2 Port Access 1 Subcutaneous Medication 1 1 1 Adult Administration 1 1 4 10 Trauscutaneous Pacing 1 1 4 10 Transcutaneous P		1	1			
Dysrhythmia - Adult Pathology - Team Lead - Chest Pain	Pathology - Any - Team Member					10
Dysrhythmia - Adult Pathology - Team Lead - Chest Pain	Pathology - Team Lead - Cardiac					1
Pathology - Team Lead - Chest Pain - Geriatric 1						1
- Geriatric 1 1 2 2 2 2 2 2 2 2						1
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Pathology - Team Lead - Respiratory Distress - Pediatric						1
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Pathology - Team Lead - Sepsis - Geriatric						1
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Adult 2 2 2 2 2 Trauma Physical Assessment - 1 1 2		-	1			
Trauma Physical Assessment -		2		2	2	
	Adult	1	1	2		

Sub-Section 3.490.48 - Paramedic Academy Clinical Requirements

DEFINITIONS

<u>Clinical experience</u> is defined as a planned and scheduled educational student experience with live patient contact activities in settings, such as hospitals, clinics, free-standing emergency centers, and may include field experience.

<u>Field experience</u> is defined as planned and scheduled educational student time spent on an EMS unit, which may include observation and skill development, but which does not include team leading and does not contribute to the CoAEMSP definition of field internship.

<u>Field internship</u> is defined as planned and scheduled educational student time on an ALS EMS unit responsible for responding to critical and emergent patients who access the emergency medical system to develop and evaluate team leading skills. The primary purpose of field internship is a capstone experience managing the Paramedic-level decision-making associated with prehospital patients.

ELIGIBILITY

To be eligible to attend clinical rotations, the student must maintain passing status (min 70% overall grade) in the Paramedic Academy. Urine drug screen may be required prior to starting clinicals. CMH Lab will be used for these drug screens. Administrative contact for CMH Lab is Paulette Ivey.

STAFF SUBSTITUTIONS

At no time may a paramedic student be substituted for EMT or paramedic staff. If the paramedic student is also an employee of the clinical site:

- When functioning as a paramedic student:
 - Must wear student uniform.
 - Must not perform normal work duties that are outside the scope of the clinical objectives.
- When functioning as staff:
 - Must not wear student uniform.
 - Must not perform clinical student activities outside the scope of employed job description.

GENERAL REQUIREMENTS

Students are required to participate and be eligible to participate at all clinical sites without exception. Students must also comply with the facilities' policies and procedures. CMH is not obligated to locate an additional clinical site to accommodate a student for any reason.

Courses with a clinical component require mastery of the clinical objectives in order to successfully complete the course. The clinical component of any course is an integral portion of that course. Clinical experiences are graded on a pass/fail basis. If a student fails in clinical, he or she will fail the course. Students will be sent home from the clinical setting for unsafe or unprofessional behavior and may be grounds from dismissal from the course.

INABILITY TO ENCOUNTER LIVE PATIENTS

If the minimum number of patient contacts and skills listed for each clinical requirement is not completed by the end of the minimum hours required, additional hours must be scheduled to meet the contact requirements. A deadline of the end of each trimester must be met for all hour and patient contact requirements and a deadline of 12 months after the completion of all classroom trimesters for total completion and NREMT testing. There will be no extensions given for the 12-month deadline after classroom completion.

In the event a student is unable to obtain the minimum number of live patient encounters or skill competence, the deficiency will be evaluated on a case-by-case basis to develop an action plan that may include (but not limited to):

- Termination from the program,
- Extension of deadlines, and/or
- Alternative methods to demonstrate competence in scenario-based high-fidelity simulations. Simulations will replace live encounters on a 1:1 ratio basis with the following exceptions:
 - At least two pediatric live encounters must be done on live pediatric humans and may not be simulated.
 - All required team leads in Sub-Section 3.490.70 EMS 536 (Paramedic Field Internship) Course (page 206) must be done on humans and may not be simulated.

SCOPE

If, at any time during a clinical rotation, a student is asked to perform outside his/her scope of training, that student shall immediately tell the requestor that they are not trained for that procedure and are not allowed to do it.

IDENTIFICATION

All students will be required to wear a CMH-issued ID badge during all classroom, skills, and clinical rotations. The name badge shall be returned upon course completion (or having dropped the course). Students will assume replacement cost if their name badge is lost, mutilated, or destroyed. Replacement cost will be \$10 each.

DOCUMENTATION

Platinum Planner (www.platinumplanner.net) will be used to document and track skills, labs, scenarios, simulations, and clinical contacts. Documentation is the responsibility of the student. The patient medical record number must be documented with the skills performed. If the medical record number is not included, the patient encounter and skills associated will be returned to the student and will not count until the medical record number is attached. If, during spot checks and subsequent investigation, a falsification is found, disciplinary action will be taken and may include termination from the program.

When documenting live patient contacts and skills in Platinum Planner, the first line in the narrative must contain a medical record number trackable to the patient. This could be a hospital number off a face sheet or an EMS run number. Spot checks will be done to ensure accurate documentation.

CLINICAL DOUBLE-DIPPING POLICY

When documenting skills, you may document as many skills on the same patient as you actually perform (i.e. medication administration), however, patient assessments may only be documents once per patient per patient visit. If you assess the same patient on different shifts, both assessments may be counted. If the patient leaves and returns for a second visit (or calls 911 a second time while riding the ambulance), both assessments and both team leads (if applicable) may be documented.

CLINICAL SKILL REQUIREMENTS

The table below meets or exceeds CoAEMSP Appendix G requirements. Asterisks (*) in the table indicate a minimum success rate is also required.

- Intravenous Therapy Live Skill requires 16 successes out of the last 20 attempts.
- Direct Orotracheal Intubation Adult Clinical Skill requires nine (9) success out of the last ten (10) attempts.

	Minim	num Number of Success:	ful Attempts
	Individual	Live Skill in Clinical	Live Skill in
Skill	Live Skill	or Field Experience	Field Internship
DKIII	Preceptor		Preceptor
	Evaluator	Preceptor Evaluator	Evaluator
Airway Management	2 / 0.1000001	25	2141414111
ALS Team Leads			20
Assessment of Adolescents		2	-
Basic - 12-Lead ECG Placement	4	_	
Basic - Inhaled Medication Administration		2	
Comprehensive Normal Physical Assessment - Pediatric	2	_	
CPAP and PEEP		2	
Direct Orotracheal Intubation - Adult		12 *	
Intramuscular Medication Administration		3	
Intravenous Therapy	20 *	15	
IV Medication Administration	2	30	
Medical Including Cardiac Physical Assessment	40	10	
Normal Delivery with Newborn Care	10	2	
Obtain a Patient History from an Alert and Oriented			
Patient		8	
Pathology - Any - Pediatric - Adolescent (12-18 yr)		2	
Pathology - Any - Pediatric - Infant (1-12 mo)		2	
Pathology - Any - Pediatric - Meonate (1-28 dy)		2	
Pathology - Any - Pediatric - Newborn (1-24 hr)		2	
Pathology - Any - Pediatric - Preschooler (3-6 yr)		2	
Pathology - Any - Pediatric - School-Ager (6-12 yr)		2	
Pathology - Any - Pediatric - School-Ager (6-12 yr) Pathology - Any - Pediatric - Toddler (1-3 yr)		2	
Pathology - Medical - Abdominal Pain		2	
Pathology - Medical - Acute Coronary Syndrome		2	
Pathology - Medical - Active Coronary Syndrome Pathology - Medical - Altered Mental Status		2	
		36	
Pathology - Medical - Any - Adult (18-64 yr)		12	
Pathology - Medical - Any - Geriatric (>63 yr)		18	
Pathology - Medical - Any- Pediatric (<18 yr)		2	
Pathology - Medical - Cardiac Dysrhythmia		2	
Pathology - Medical - Chest Pain			
Pathology - Medical - Hypoglycemia		2 2	
Pathology - Medical - Overdose			
Pathology - Medical - Psychiatric	<u> </u>	6	
Pathology - Medical - Respiratory Distress		2	
Pathology - Medical - Sepsis		2	
Pathology - Medical - Shock		2	
Pathology - Medical - Stroke		2	
Subcutaneous Medication Administration		1	
Supraglottic Airway Device - Adult		12	
Trauma Physical Assessment - Geriatric		6	
Trauma Physical Assessment - Adult	6	18	
Trauma Physical Assessment - Pediatric		6	

Sub-Section 3.490.50 - EMS 501 (First Trimester Paramedic) Course

PREREQUISITES:

Enrollment in the Paramedic Academy.

This course contains the following sections of the paramedic educational standards:

- PR Preparatory (all sections),
- PA Patient Assessment (all sections),
- AM Airway Management, Respiration, and Ventilation (all sections),
- MT Medicine (only section MT10 Respiratory).

COURSE SCHEDULE:

Lecture and Laboratory is on Mondays and Thursdays from 0730 to 1730. During the last eight weeks of the course, class will meet every other Monday and every Thursday.

COURSE INSTRUCTOR:

Theron Becker. Office hours by appointment. Email:

theron.becker@citizensmemorial.com.

COURSE SCHEDULE FOR 2020:

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
1	1	Mon	Student Success / Platinum		
		(9 hr)	Walkthrough		
		12/12/12	Basic Skills Check		
			NFA Q0123 Assignment		
					Simulation
		Thu	Applied Research Project		
		(9 hr)	(ARP) instructions		
			ARP Problem Statements		
			Ch 11 - Patient Assessment		Ch 11 Case Study
					Ch 11 Test
					Simulation
	2	Mon	Ch 13 - Pharmacology		Ch 13 Case Study
		(9 hr)			Ch 13 Test
			Pharmacology Review (NS,		Simulation
			LR)		
		Thu	Ch 14 - Medication		Ch 14 Case Study
		(9 hr)	Administration		Ch 14 Test
			Pharmacology Review (Neo-		Pharmacology Quiz (NS, LR)
			Synephrine, Oxygen)		Simulation

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
					Module Affective Evaluation
2	3	Mon (9 hr)	Port Access Class	Cassie Ahlers (Vascular Access Team)	
			Medical Math	,	
			Pharmacology Review (Etomidate, Ketamine)		Pharmacology Quiz (Neo- Synephrine, Oxygen) Simulation Education Manual Quiz
		Thu (9 hr)	Ch 15 - Airway Management and Ventilation		Ch 15 Case Study Ch 15 Test
		(*)	Pharmacology Review (Rocuronium, Vecuronium)		Pharmacology Quiz (Etomidate, Ketamine) Simulation
	4	Mon (9 hr)	BLS Airway Review	Shelly Elsey (Flight nurse)	
			ENT and Airway Emergencies	Matt Ericksen (ENT Surgeon)	
			Pharmacology Review (Succinylcholine, Albuterol)		Pharmacology Quiz (Rocuronium, Vecuronium) Simulation
		Thu (9 hr)	Ch 16 - Respiratory Emergencies	Jacob Snyder (Cox Air Care)	Ch 16 Case Study Ch 16 Test
			Difficult Airways	Neal Taylor (EMS Director)	
			Pharmacology Review (Duoneb, Ipratropium)		Pharmacology Quiz (Succinylcholine, Albuterol) Simulation Module Affective Evaluation
3	5	Mon	Rapid Sequence Intubation		
		(9 hr)	Ch 7 Medical Terminology	Bobby OKeefe (Paramedic)	Ch 7 Case Study Ch 7 Test
			Pharmacology Review (Racemic Epi, Xopenex)		Pharmacology Quiz (Duoneb, Ipratropium) Simulation
		Thu (9 hr)	Basic Rhythm Identification	Ryan McDonald (Paramedic)	
			Pharmacology Review (Atropine, Epi 1:10,000)		Pharmacology Quiz (Racemic Epi, Xopenex) Simulation
	6	Mon (9 hr)	Ch 17 - Cardiovascular Emergencies	Dr. John Best (Cardiologist)	Ch 17 Case Study Ch 17 Test
			Pharmacology Review (Adenosine, Sodium Bicarb)		Pharmacology Quiz (Atropine, Epi 1:10,000) Simulation
		Thu (9 hr)	Introduction to 12-Leads	Ryan McDonald (Paramedic)	
			Congestive Heart Failure	Kyla Inman (Cardiac NP)	
			Pharmacology Review (Amiodarone, Lidocaine)		Pharmacology Quiz (Adenosine, Sodium Bicarb)

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
		,,			Simulation
					Module Affective Evaluation
4	7	Mon	AHA - Advanced Cardiac Life	Linda Taylor	
		(9 hr)	Support (ACLS) - Part 1	(ER RN)	
		Thu	AHA - Advanced Cardiac Life	Linda Taylor	ACLS Test
		(9 hr)	Support (ACLS) - Part 2	(ER RN)	
			Pre-Hospital Cardiac Arrest		
			Management		DI I O
			Pharmacology Review		Pharmacology Quiz
			(Cardizem, Procainamide)		(Amiodarone, Lidocaine) EKG Quiz
					Simulation
	8	Mon	Ch 8 - Anatomy and Physiology		Ch 8 Case Study
	O	(9 hr)	Cir 6 7 matomy and 1 mysiology		Ch 8 Test
		(> 111)	Pharmacology Review (Aspirin,		Pharmacology Quiz
			Heparin)		(Cardizem,
					Procainamide)
					EKG Quiz
					Simulation
		Thu	Ch 2 - Workforce Safety and	Brice Flynn	Ch 2 Case Study
		(9 hr)	Wellness	(EMS Safety	Ch 2 Test
				Chief)	GL a G
			Ch 9 - Pathophysiology	Bobby OKeefe	Ch 9 Case Study
			Dhama a la an Danian	(Paramedic)	Ch 9 Test
			Pharmacology Review (Captopril, Dopamine)		Pharmacology Quiz (Aspirin,
			(Captopin, Dopanine)		Heparin) EKG Quiz
					Simulation
					Module Affective Evaluation
			One-on-one academic		NFA Q0123 Due
			counseling with each		ARP Problem Statements
			student		Due
					Mid-Term Exam
5	9	Mon	Ch 3 - Public Health	Wanita Lister	Ch 3 Case Study
		(9 hr)		(Public Health	Ch 3 Test
			CL 40 P II I P	RN)	
			Ch 43 - Pediatric Emergencies		Ch 43 Case Study
			Pharmacology Review		Ch 43 Test Pharmacology Quiz
			(Decadron, Solu-Medrol)		(Captopril, Dopamine)
			(Decadron, Sola Wedlor)		EKG Quiz
					Simulation
		Thu	Ch 41 - Obstetrics	Beth Perkins	Ch 41 Case Study
		(9 hr)		(MU Sim Lab)	Ch 41 Test
			Pharmacology Review (Lasix,		Pharmacology Quiz
			Oxytocin)		(Decadron, Solu-Medrol)
					EKG Quiz
	10	T7 '			Simulation
	10	Varies	At least one clinical shift		GL 42 G G L
		Thu	Ch 42 - Neonatal Care		Ch 42 Case Study
		(9 hr)	Pharmacology Review ()		Ch 42 Test Pharmacology Quiz (Lasix,
			Filarinacology Review ()		Oxytocin)
					EKG Quiz
		1		1	PIZO Ánis

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
			•		Simulation
					Module Affective Evaluation
6	11	Mon	AHA - Pediatric Advanced Life	Dr. Juris Simanis	
		(9 hr)	Support (PALS) - Part 1	(Physician)	
		Thu	AHA - Pediatric Advanced Life	Dr. Juris Simanis	PALS Test
		(9 hr)	Support (PALS) - Part 2	(Physician)	
			Ch 1 - EMS Systems		Ch 1 Case Study
					Ch 1 Test
			Pharmacology Review ()		Pharmacology Quiz (random,
					random)
					EKG Quiz
					Simulation
	12	Varies	At least one clinical shift		
		Thu	Ch 4 - Medical Legal and		Ch 4 Case Study
		(9 hr)	Ethical Issues		Ch 4 Test
			Ch 6 - Documentation		Ch 6 Case Study
					Ch 6 Test
			Courtroom Experience	Jeff Anderson	
			-	(Lawyer)	
			Pharmacology Review ()		Pharmacology Quiz (random,
					random)
					EKG Quiz
					Simulation
					Module Affective Evaluation
7	13	Mon	Ch 5 - Communications		Ch 5 Case Study
		(9 hr)			Ch 5 Test
			Ch 46 - Transport Operations		Ch 46 Case Study
					Ch 46 Test
			Pharmacology Review ()		Pharmacology Quiz (random,
					random)
					EKG Quiz
					Simulation
		Thu	Ch 10 - Life Span Development		Ch 10 Case Study
		(9 hr)			Ch 10 Test
			Ch 28 - Psychiatric	Joy Murphy	Ch 28 Case Study
			Emergencies	(Psychologist)	Ch 28 Test
			Pharmacology Review (Ativan,		Pharmacology Quiz (random,
			Haldol)		random)
					EKG Quiz
	1.4	1 7	A 4 1 4 1' . 1 . 1 . 1 . 1 . 1		Simulation
	14	Varies	At least one clinical shift	Manager V	DTED Test
		Thu	NAEMT - Psychological Trauma in EMS Patients	Morgan Young	PTEP Test
		(9 hr)	(PTEP)	(Paramedic)	
					Pharmacology Ouiz (Ativon
			Pharmacology Review ()		Pharmacology Quiz (Ativan, Haldol)
					EKG Quiz
					Simulation
					Module Affective Evaluation
8	15	Mon	Ch 48 - Vehicle Extrication and		Ch 48 Case Study
U	1.5	(9 hr)	Special Rescue		Ch 48 Test
		(>111)	Ch 50 - Terrorism		Ch 50 Case Study
					Ch 50 Case Study Ch 50 Test
		1		1	CH JU I Cot

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
			Pharmacology Review ()		Pharmacology Quiz (random,
					random)
					EKG Quiz
					Simulation
		Thu	Ch 12 - Critical Thinking and		Ch 12 Case Study
		(9 hr)	Decision Making		Ch 12 Test
			Ch 52 - Crime Scene		Ch 52 Case Study
			Awareness		Ch 52 Test
			Pharmacology Review ()		Pharmacology Quiz (random,
					random)
					EKG Quiz
					Simulation
	16	Varies	At least one clinical shift		
		Thu	One-on-one academic		Module Affective Evaluation
		(9 hr)	counseling with each		Final Exam
			student		Psychomotor Exam
					ARP Part 1 Due

APPLIED RESEARCH PROJECT - PART 1 OF 3

Part one of the Applied Research Project focuses on describing an EMS problem. The completed part one of the Applied Research Project should be submitted in an electronic format (Microsoft Word is preferred). There is no minimum number of pages, but correct APA citations and bibliography, spelling, grammar, and punctuation is expected.

The following sections must be included:

Introduction:

• Identify your problem statement. The problem should be very specific and have a practical significance for your own organization. It should also be interesting to you. The problem statement should be limited to one sentence. Focus on the present and do not analyze causes at this point. An example might be, "The problem is CMH EMS is not able to provide medications that require refrigeration."

Background and Significance:

- Describe the background and history of the problem in your organization.
- Present the significance of the problem in your organization from a past, present, and probable future impact on organizational effectiveness or patient care.

Literature Review:

• Provide a summary of critical findings of others who have published documents related to the problem statement.

References:

• Include a reference list in APA format. References may be from any source, but at least a few of them should be scholarly (not a website, not a trade journal, etc.). Great scholarly sources come from peer-reviewed journals within the past five years.

<u>APPLIED RESEARCH PROJECT - PART 1 - GRADING RUBRIC:</u>

Section	Checklist	Evaluation
All sections	[] Correct grammar.	
	[] Correct punctuation.	13 points
	[] Correct spelling.	possible in
	[] Correct sentence structure.	this section
	[] Correct APA format of citations throughout paper.	
Introduction	[] Problem statement clearly defined.	25 points
	[] Problem statement specific.	possible in
	[] Problem statement has practical significance.	this section
	[] Clear and complete background analysis of the problem	
Background	provided.	25 points
and	[] Sufficient evidence provided to justify study from an	possible in
Significance	organizational perspective.	this section
	[] Includes past, present, and probable future impacts.	
Literature	Sufficiently comprehensive.	25 points
Review	[] Findings are presented logically and clearly.	possible in
		this section
References	[] Correct APA format of reference section.	12 points
	Sources are current.	possible in
	At least a few sources are from peer reviewed journals.	this section

Sub-Section 3.490.52 - EMS 506 (Paramedic Clinical Experience I) Course

PREREQUISITES:

Enrollment in the Paramedic Academy.

This course provides an opportunity for paramedic students to apply classroom knowledge to real-life situations and patients. Included in this course are assessment skills for critical care hospital patients, respiratory skills in the hospital, and vascular access and medication administration skills for hospital patients.

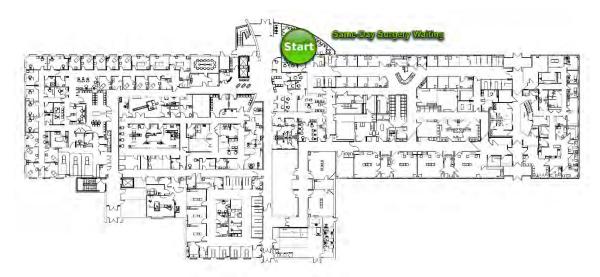
If the minimum number of patient assessments and skills listed in Sub-Section 3.490.48 - Paramedic Academy Clinical Requirements (page 166) are not completed by the end of the minimum hours required, additional hours must be scheduled to meet the contact requirements.

DEADLINE:

All requirements for this course must be completed by the end of the second trimester.

SAME-DAY SURGERY / ENDOSCOPY / OUTPATIENT RADIOLOGY:

- <u>Prerequisites</u>: Complete Chapter 13 (Pharmacology) and 14 (Medication Administration) and Port Access Class. Refer to Section 6.600.54 Paramedic Academy Clinical Requirements (page 191) for lab requirements that must be met before intubating live humans.
- Location options: CMH Douglas Building (Bolivar)
- Paramedic students will shadow RNs and lab techs.
- Complete a minimum of 36 hours by the end of second trimester.
- Student scheduling information:
 - Email lani.hayes@citizensmemorial.com to sign up.
 - Two paramedic students can sign up Tuesdays through Fridays; only one paramedic student on Mondays.
 - Wednesdays and Fridays are often the busiest days for these locations.
- Where to go:
 - First floor Douglas Building. Go to Registration in the Waiting Room for Same-Day Surgery and let them know you are a paramedic student doing clinicals. They will direct you to change into scrubs and you have several areas that will help you get your skills.
 - When you arrive on the site, go upstairs to the Infusion Center to let them know you are a paramedic student looking for vascular access opportunities. They will let you know what they have scheduled for the day.



- Administrative contact information:
 - CMH Same-Day Surgery: <u>becky.hancock@citizensmemorial.com</u> and toni.richardson@citizensmemorial.com
 - CMH Endoscopy: Jennifer.bradley@citizensmemorial.com
 - CMH Outpatient Radiology: gayla.hankins@citizensmemorial.com

INTENSIVE CARE UNIT:

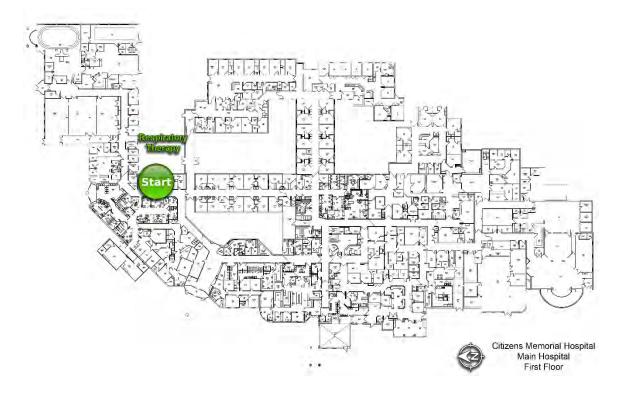
- <u>Prerequisites</u>: Complete Chapter 13 (Pharmacology) and 14 (Medication Administration) and Port Access Class.
- <u>Location options</u>: CMH Hospital (Bolivar)
- Paramedic students will shadow intensive care nurse.
- Complete a minimum of 24 hours by the end of second trimester.
- Student scheduling information:
 - Email lani.hayes@citizensmemorial.com to sign up.
 - Only one paramedic student at a time can be scheduled in the ICU.
 - 12-hour shifts are typical but OK to be as short as 8-hour shifts.
 - Shifts start at 0630 and 1830 hours.
- Where to go:
 - Outside the entrance to ICU, there is a phone on the wall, pick it up, tell the nurse at the desk you are a paramedic student, and they will let you in.



- Administrative contact information:
 - CMH: claire.dale@citizensmemorial.com
 - Mercy NTICU: dusti.everetthinkle@mercy.net

RESPIRATORY THERAPY

- <u>Prerequisites</u>: Complete first trimester final exam.
- Location options: CMH Hospital (Bolivar)
- Paramedic students will shadow respiratory therapist.
- Complete a minimum of 12 hours by the end of second trimester.
- Student scheduling information:
 - Email lani.hayes@citizensmemorial.com to sign up.
 - Only one paramedic student at a time can be scheduled in RT.
 - Shifts start at 6 am.
- Where to go:
 - CMH Respiratory Therapy offices are near the Cardiology Department. Go in there and they will help you.



- Administrative contact information:
 - CMH: allen.morris@citizensmemorial.com
 - Mercy: <u>billy.haire@mercy.net</u>

Sub-Section 3.490.54 - Paramedic Clinical Evaluation Cards

Thank you for being a preceptor for a CMH paramedic clinical student.

For the student to get credit for completing this clinical, an evaluation must be completed by you.

Please go to the following link and complete the shift evaluation.

http://ozarksems.com/eval-clinical.php



Student name: Clinical date:		
Time in:	Time out:	
School contact for exp Theron Becker 417-5	oosure or other reasons:	

Paramedic students are to encouraged and allowed to perform the following skills:

- Advanced assessments
- 12-lead acquisition and interpretation
- Pharyngeal, blind-insertion, endotracheal, and cricothyrotomy airways
- Upper airway and tracheal suctioning
- CPAP and BiPAP
- Establish IV and IO access
- Maintain and utilize port or central line access
- Administration of any medication by any route
- Perform cardioversion, manual defibrillation, and transcutaneous pacing
- Manage adult cardiac arrests
- Manage the following TCD patients: STEMI, Stroke, or Sepsis

Thank you for being a preceptor for a CMH paramedic clinical student.

For the student to get credit for completing this clinical, an evaluation must be completed by you.

Please go to the following link and complete the shift evaluation.

http://ozarksems.com/eval-clinical.php



Student name:		
Clinical date:		
Time in:	Time out:	

School contact for exposure or other reasons:

Theron Becker 417-597-3688

Paramedic students are to encouraged and allowed to perform the following skills:

- Advanced assessments
- 12-lead acquisition and interpretation
- Pharyngeal, blind-insertion, endotracheal, and cricothyrotomy airways
- Upper airway and tracheal suctioning
- CPAP and BiPAP
- Establish IV and IO access
- Maintain and utilize port or central line access
- Administration of any medication by any route
- Perform cardioversion, manual defibrillation, and transcutaneous pacing
- Manage adult cardiac arrests
- Manage the following TCD patients: STEMI, Stroke, or Sepsis

Sub-Section 3.490.56 - BIO 111 (Anatomy and Physiology I) Course

See course syllabus from Bolivar Technical College.

Sub-Section 3.490.58 - EMS 511 (Second Trimester Paramedic) Course

PREREQUISITES:

Successful completion of Sub-Section 3.490.50 - EMS 501 (First Trimester Paramedic) Course (page 170).

This course contains the following sections of the paramedic educational standards:

• MT - Medicine (all sections except section MT10 - Respiratory, which was covered in the previous trimester).

COURSE SCHEDULE:

Lecture and Laboratory is on every other Monday from 0730 to 1730 and on every Thursday from 1330 to 1730.

COURSE INSTRUCTOR:

Theron Becker. Office hours by appointment. Email: theron.becker@citizensmemorial.com.

COURSE SCHEDULE FOR 2020:

Module	Wk	Day	Description	Guest	Tests and Exams
				Instructor	
1	1	Mon	Applied Research Project (ARP)		
		(9 hr)	instructions		
		12/12/12			
			NFA Q0170 Assignment		
			Ch 19 - Diseases of the Ears,		Ch 19 Case Study
			Nose, and Throat		Ch 19 Test
			Pharmacology Review ()		EKG Quiz
					Simulation
		Thu	Ch 21 - Genitourinary and Renal		Ch 21 Case Study
		(4 hr)	Emergencies		Ch 21 Test
			Pharmacology Review (Toradol)		Pharmacology Quiz (random,
					random)
					EKG Quiz
					Simulation
	2	Varies	At least one clinical shift		
		Thu	Ch 22 - Gynecologic		Ch 22 Case Study
		(4 hr)	Emergencies		Ch 22 Test
			Pharmacology Review (Reglan,		Pharmacology Quiz (Toradol,
			Zofran)		random)

Module	Wk	Day	Description	Guest	Tests and Exams
				Instructor	
					EKG Quiz
					Simulation
					Module Affective Evaluation
2	3	Mon	Ch 20 - Abdominal and		Ch 20 Case Study
		(9 hr)	Gastrointestinal		Ch 20 Test
			Emergencies		
			Pharmacology Review		Pharmacology Quiz (Reglan,
			(Phenergan)		Zofran)
					EKG Quiz
					Simulation
		Thu	Ch 18 - Neurologic Emergencies	Aaron Weaver,	Ch 18 Case Study
		(4 hr)	- Part 1	NRP	
			NIHSS Assigned		
			Pharmacology Review		Pharmacology Quiz
			(Hydralazine, Valium)		(Phenergan, random)
					EKG Quiz
					Simulation
	4	Varies	At least one clinical shift		St. 10 55
		Thu	Ch 18 - Neurologic Emergencies	Aaron Weaver,	Ch 18 Test
		(4 hr)	- Part 2	NRP	NIHSS Due
			Pharmacology Review (Versed)		Pharmacology Quiz
					(Hydralazine, Valium)
					EKG Quiz
					Simulation
3	5	Mon	Ch 22 Endamina Engage		Module Affective Evaluation
3	3	Mon (9 hr)	Ch 23 - Endocrine Emergencies		Ch 23 Case Study Ch 23 Test
		()	Pharmacology Review		Pharmacology Quiz (Versed,
			(Dextrose, Glucose)		random)
					EKG Quiz
					Simulation
		Thu	Ch 24 - Hematologic		Ch 24 Case Study
		(4 hr)	Emergencies		Ch 24 Test
			Pharmacology Review		Pharmacology Quiz
			(Glucagon, Thiamine)		(Dextrose, Glucose)
					EKG Quiz
					Simulation
	6	Varies	At least one clinical shift		
		Thu	Ch 25 - Immunologic		Ch 25 Case Study
		(4 hr)	Emergencies		Ch 25 Test
			Pharmacology Review		Pharmacology Quiz
			(Benadryl, Epi 1:1,000)		(Glucagon, Thiamine)
					EKG Quiz
					Simulation
					Module Affective Evaluation
4	7	Mon	NAEMT - Advanced Medical		
		(9 hr)	Life Support (AMLS) - Part		
			1		
		Thu	NAEMT - Advanced Medical		
		(4 hr)	Life Support (AMLS) - Part		
		** '	2		
	8	Varies	At least one clinical shift		

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
		Thu (4 hr)	NAEMT - Advanced Medical Life Support (AMLS) - Part 3	mstructor	AMLS Test
			Pharmacology Review (Activated Charcoal, Narcan)		Pharmacology Quiz (Benadryl, Epi 1:1,000) EKG Quiz Simulation
			One-on-one academic counseling with each student		NFA Q0170 Due ARP Problem Purpose Due Mid-Term Exam Module Affective Evaluation
5	9	Mon (9 hr)	Ch 27 - Toxicology	Morgan Young (Paramedic)	Ch 27 Case Study Ch 27 Test
			Pharmacology Review (Calcium Chloride)		Pharmacology Quiz (Activated Charcoal, Narcan) EKG Quiz Simulation
		Thu (4 hr)	Ch 26 - Infectious Diseases - Part 1		Ch 26 Case Study
		(132)	Pharmacology Review (Acetaminophen, Ibuprofen)		Pharmacology Quiz (Calcium Chloride, random) EKG Quiz Simulation
	10	Varies	At least one clinical shift		
		Thu (4 hr)	Ch 26 - Infectious Diseases - Part 2		Ch 26 Test
			Pharmacology Review ()		Pharmacology Quiz (Acetaminophen, Ibuprofen) EKG Quiz Simulation Module Affective Evaluation
6	11	Mon (9 hr)	Ch 44 - Geriatric Emergencies		Ch 44 Case Study Ch 44 Test
			Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz Simulation
		Thu (4 hr)	Ch 49 - Hazardous Materials - Part 1		Ch 49 Case Study
			Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz Simulation
	12	Varies	At least one clinical shift		
		Thu (4 hr)	Ch 49 - Hazardous Materials - Part 2		Ch 49 Test
		(4 III)	Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz Simulation Module Affective Evaluation

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
7	13	Mon	NAEMT - Geriatric Education	Morgan Young	
,		(9 hr)	for EMS (GEMS) - Part 1	(Paramedic)	
		Thu	NAEMT - Geriatric Education	Morgan Young	
		(4 hr)	for EMS (GEMS) - Part 2	(Paramedic)	
	14	Varies	At least one clinical shift		
		Thu	NAEMT - Geriatric Education	Morgan Young	GEMS Test
		(4 hr)	for EMS (GEMS) - Part 3	(Paramedic)	
			Pharmacology Review ()		Pharmacology Quiz (random, random)
					EKG Quiz
					Simulation
					Module Affective Evaluation
8	15	Mon	Hazmat Medic	Mike Schultz	
		(9 hr)		(Hazmat Medic)	
			Ch 45 - Patients with Special		Ch 45 Case Study
			Challenges		Ch 45 Test
			Pharmacology Review ()		Pharmacology Quiz (random, random)
					EKG Quiz
					Simulation
		Thu	One-on-one academic		Psychomotor Exam
		(4 hr)	counseling with each student		
	16	Varies	At least one clinical shift		
		Thu	One-on-one academic		Module Affective Evaluation
		(4 hr)	counseling with each student		Final Exam
					ARP Part 2 Due

APPLIED RESEARCH PROJECT - PART 2 OF 3

Part two of the Applied Research Project focuses on researching a solution to the EMS problem identified in part one. The completed part two of the Applied Research Project should be submitted in an electronic format (Microsoft Word is preferred). There is no minimum number of pages, but correct APA citations and bibliography, spelling, grammar, and punctuation is expected.

The following sections must be included:

Introduction:

- Define your purpose. The purpose statement should be a mirror of the problem statement in the first paper and describes exactly what you are going to accomplish. An example might be, "The purpose of this paper is to research what other EMS agencies do to overcome the need for medication refrigeration."
- Three to five research questions. Research questions provide a roadmap for accomplishing your purpose. These questions are the factors and questions that need to be answered in order to accomplish your purpose. If you have a research question, you must generate information to respond to that question. A few examples might be, "Are any other EMS agencies using refrigerated medications? If so, what equipment are they using to maintain refrigeration on ambulances? If not, what alternative medications are they using?"

Procedures:

- Explanation of what the student did to generate new and original data to answer the research questions.
- Procedures must be delineated clearly to permit replication by other researchers.
- Discuss limitations of the procedures you selected.

Results:

- Clear and comprehensive narrative description of the findings from procedures.
- Results and findings must be in a logical manner to answer all the research questions without personal editorializing.

Appendix:

- Provide a copy of research tool(s) utilized.
- Provide complete results of research.

References:

• Reference list in APA format.

<u>APPLIED RESEARCH PROJECT - PART 2 - GRADING RUBRIC:</u>

Section	Checklist	Evaluation
All sections	 [] Correct grammar. [] Correct punctuation. [] Correct spelling. [] Correct sentence structure. [] Correct APA format of citations throughout paper. [] Purpose statement clearly defined. 	10 points possible in this section 25 points
Introduction	[] Research questions clearly stated.[] At least three research questions included.	possible in this section
Procedures	[] Procedures sufficiently delineated to permit replication. [] Procedures appropriate to achieve stated purpose. [] Limitations are discussed.	25 points possible in this section
Results	 [] Results clearly and concisely stated in narrative form. [] Detailed results of all procedures provided. [] Specific answers to original research questions provided. [] Comprehensive analysis of data is included without personal editorializing. [] Ties back to purpose statement. [] Tables and figures clearly presented, correctly labeled, and contain appropriate data. 	25 points possible in this section
References	[] Correct APA format of reference section.	5 points possible in this section
Appendix	[] Research tool(s) included. [] Complete results from research included.	10 points possible in this section

Sub-Section 3.490.60 - EMS 516 (Paramedic Clinical Experience II) Course

PREREQUISITES:

Enrollment in the Paramedic Academy.

This course provides an opportunity for paramedic students to apply classroom knowledge to real-life situations and patients. Included in this course are advanced airway skills, geriatric patient assessments, and cardiac patient assessments. Additionally, assessment and treatment of emergency room patients are included in this course.

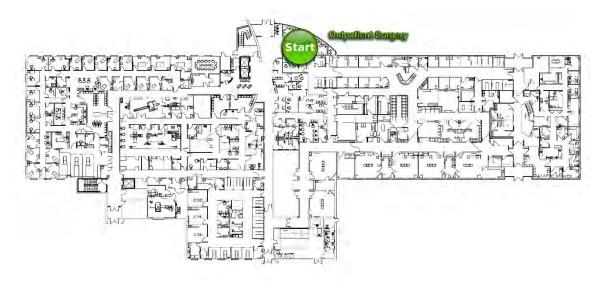
If the minimum number of patient assessments and skills listed in Sub-Section 3.490.48 - Paramedic Academy Clinical Requirements (page 166) are not completed by the end of the minimum hours required, additional hours must be scheduled to meet the contact requirements.

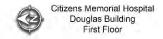
DEADLINE:

All requirements for this course must be completed by the end of the second trimester.

ANESTHESIA:

- <u>Prerequisites</u>: Start second trimester.
- <u>Location options</u>:
 - CMH Hospital (Bolivar) or
 - CMH Douglas Building (Bolivar)
- Paramedic students will shadow CRNA.
- There is not a minimum hour requirement for this clinical.
- <u>Student scheduling information</u>: Email <u>lani.hayes@citizensmemorial.com</u> to sign up.
- Where to go:





- Administrative contact information: becky.hancock@citizensmemorial.com
- Students must inform the patient with a script similar to: "My name is Theron and I am a paramedic student. My preceptor is Jason, who is a nurse anesthetist. Is it OK if I put in your breathing tube during your operation today?"

GERIATRIC PSYCHIATRIC UNIT:

- <u>Prerequisites</u>: Start second trimester.
- Location options: CMH Hospital (Bolivar)
- Paramedic students will shadow psychiatric nurse.
- Complete a minimum of 12 hours by the end of third trimester.
- Student scheduling information:
 - Email lani.hayes@citizensmemorial.com to sign up.
 - Two students at a time can do clinicals in the unit simultaneously.
 - Shift start time is 6:45 am.
 - Half-way through the shift, students will switch sides of the unit to have comprehensive view of the unit.
- Where to go:
 - Pickup the phone outside the sally port entrance to the unit and tell the nurse you are a paramedic student doing clinicals.



• Administrative contact information: angela.tucker@citizensmemorial.com

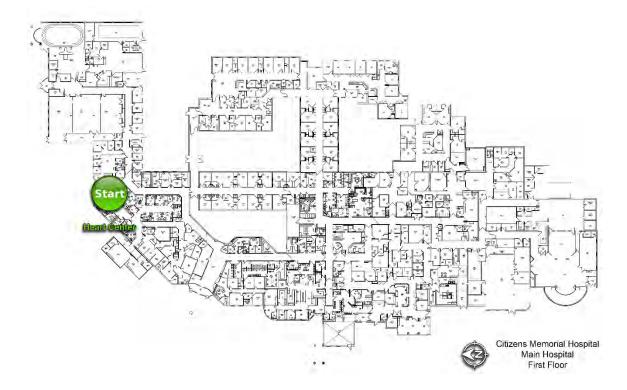
EMERGENCY ROOM:

- Prerequisites:
 - Complete ACLS Course
 - Must have done at least one shift in Anesthesia with at least one successful live human intubation.
- Location options:
 - CMH Hospital (Bolivar)
 - Cox Hospital (Springfield)
 - Mercy Hospital (Springfield)
- Paramedic students will shadow ER nurse.
- Complete a minimum of 136 hours by the end of third trimester.
- Student scheduling information:
 - Email lani.hayes@citizensmemorial.com to schedule a shift.
 - One paramedic at time can be scheduled in the ER at a time
 - One paramedic can be scheduled in the ER and one in ER Triage simultaneously.
 - Shifts available:
 - 0700 to 1900 (ER and ER Triage)
 - 1900 to 0700 (ER and ER Triage)
 - 1100 to 2300 (ER only)
- Where to go:
 - In the waiting room, tell the ER triage nurse you are a paramedic student there for clinicals.



CARDIAC CATH LAB:

- <u>Prerequisites</u>: Complete Chapter 17 (Cardiovascular Emergencies).
- <u>Location options</u>: CMH Hospital (Bolivar)
- Paramedic students will shadow cath lab nurse.
- Complete a minimum of 8 hours by the end of third trimester.
- Student scheduling information:
 - Email robert.richardson@citizensmemorial.com to schedule shifts.
 - Shifts are 8 am to 4 pm. Mondays are usually the busiest days.
- Where to go:
 - Got to front desk and say you are a paramedic student doing clinicals.
 - Also, early in your shift, find and personally introduce yourself to the cardiologist on duty.



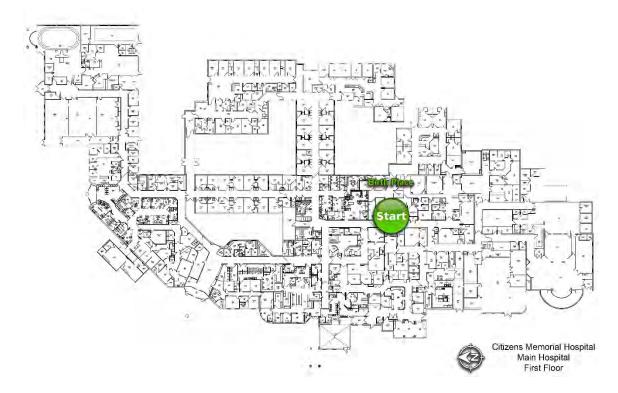
- Other information: While doing clinicals at CMH in the hospital in other departments and units, paramedic students are welcome to observe cardiac cath procedures when the cath lab team is activated.
- Administrative contact information:
 - CMH Cath Lab: robert.richardson@citizensmemorial.com
 - Mercy Cath Lab: vickie.hanna@mercy.net

WALK-IN CLINIC:

- <u>Prerequisites</u>: Complete Obstetrics and Pediatrics chapters and successfully complete PALS course.
- Location options:
 - CMH Bolivar Family Care Center (Bolivar)
 - CMH Bolivar Walk-In Clinic (Bolivar)
 - CMH Osceola Family Care Center (Osceola)
- Paramedic students will shadow clinic nurse.
- Complete a minimum of 10 hours by the end of fourth trimester.
- Where to go:
 - BFCC: Only one student at a time Mon-Fri 8a-5p.
- Administrative contact information:
 - BFCC: sarah.matlock@citizensmemorial.com

LABOR AND DELIVERY:

- <u>Prerequisites</u>: Complete Obstetrics and Pediatrics chapters and successfully complete PALS course.
- Location options: CMH Hospital (Bolivar)
- Paramedic students will shadow labor and delivery nurse.
- Complete a minimum of 12 hours by the end of fourth trimester.
- Student scheduling information: Email lani.hayes@citizensmemorial.com to sign up.
- Where to go:
 - Pick up the phone outside the Birth Place and tell the nurse you are a paramedic student doing clinicals.



• Administrative contact information: wendy.rothdiener@citizensmemorial.com

Sub-Section 3.490.62 - BIO 211 (Anatomy and Physiology II) Course

See course syllabus from Bolivar Technical College.

Sub-Section 3.490.64 - EMS 521 (Third Trimester Paramedic) Course

PREREQUISITES:

Successful completion of Sub-Section 3.490.58 - EMS 511 (Second Trimester Paramedic) Course (page 183).

This course contains the following sections of the paramedic educational standards:

- ST Shock, Resuscitation, Trauma (all sections).
- SP Special Patient Populations (all sections),
- OP EMS Operations (all sections).

COURSE SCHEDULE:

Lecture and Laboratory is on every other Monday from 0730 to 1730 and on every Thursday from 1330 to 1730.

COURSE INSTRUCTOR:

Theron Becker. Office hours by appointment. Email: theron.becker@citizensmemorial.com.

COURSE SCHEDULE FOR 2020:

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
1	1	Mon	Applied Research Project (ARP)		
		(9 hr)	instructions		
		12/12/12	NIMS 200 Assigned		
			Ch 29 - Trauma Systems and		Ch 29 Case Study
			Mechanism of Injury		Ch 29 Test
			Ch 31 - Soft-Tissue Trauma		Ch 31 Case Study
					Ch 31 Test
			Pharmacology Review		EKG Quiz
			(Tetracaine, TXA)		Simulation
		Thu	Ch 30 - Bleeding		Ch 30 Case Study
		(4 hr)			Ch 30 Test
			Pharmacology Review		Pharmacology Quiz
			(Fentanyl, Morphine)		(Tetracaine, TXA)
					EKG Quiz
					Simulation
	2	Varies	At least one clinical shift		
		Thu	Ch 33 - Face and Neck Trauma		Ch 33 Case Study
		(4 hr)			Ch 33 Test

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
			Pharmacology Review (Dilaudid, Propofol)		Pharmacology Quiz (Fentanyl, Morphine) EKG Quiz Simulation Module Affective Evaluation
2	3	Mon (9 hr)	Ch 32 - Burns	Morgan Young (Paramedic)	Ch 32 Case Study Ch 32 Test
			Pharmacology Review ()		Pharmacology Quiz (Dilaudid, Propofol) EKG Quiz Simulation
		Thu (4 hr)	Ch 34 - Head and Spine Trauma - Part 1		Ch 34 Case Study
			Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz Simulation
	4	Varies	At least one clinical shift		
		Thu (4 hr)	Ch 34 - Head and Spine Trauma - Part 2		Ch 34 Test
			Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz Simulation Module Affective Evaluation
3	5	Mon (9 hr)	Ch 35 - Chest Trauma	Dr. Brent Bartgis (Surgeon) Coordinate with Kristy Egel	Ch 35 Case Study Ch 35 Test
			Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz Simulation
		Thu (4 hr)	Ch 36 - Abdominal and Genitourinary Trauma - Part 1		Ch 36 Case Study
			Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz Simulation
	6	Varies	At least one clinical shift		
		Thu (4 hr)	Ch 36 - Abdominal and Genitourinary Trauma - Part 2		Ch 36 Test
			Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz Simulation Module Affective Evaluation

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
4	7	Mon	Ch 39 - Responding to the Field	Alicia Zacher	Ch 39 Case Study
		(9 hr)	Code	(Trauma	Ch 39 Test
				Coordinator)	
			Pharmacology Review ()		Pharmacology Quiz
					(random, random)
					EKG Quiz
					Simulation
		Thu (4 hr)	Ch 37 - Orthopaedic Trauma - Part 1		Ch 37 Case Study
			Pharmacology Review ()		Pharmacology Quiz
					(random, random)
					EKG Quiz
					Simulation
	8	Varies	At least one clinical shift		
		Thu (4 hr)	Ch 37 - Orthopaedic Trauma - Part 2		Ch 37 Test
			Pharmacology Review ()		Pharmacology Quiz
					(random, random)
					EKG Quiz
					Simulation
			One-on-one academic counseling		NIMS 200 Due
			with each student		Mid-Term Exam
					Module Affective
	_	2.5		a	Evaluation
5	9	Mon	Ch 40 - Management of the	Shelly Elsey	Ch 40 Case Study
		(9 hr)	Critical Patient	(Flight RN)	Ch 40 Test
			Pharmacology Review ()		Pharmacology Quiz
					(random, random) EKG Quiz
					Simulation
		Thu	Ch 38 - Environmental Trauma		Ch 38 Case Study
		(4 hr)	Cii 36 - Environmentai Trauma		Ch 38 Test
		(4 III)	Pharmacology Review ()		Pharmacology Quiz
			Thatmacology Review ()		(random, random)
					EKG Quiz
					Simulation
	10	Varies	At least one clinical shift		
		Thu	Ch 47 - Incident Management		Ch 47 Case Study
		(4 hr)	and Mass Casualty Incidents		Ch 47 Test
			Pharmacology Review ()		Pharmacology Quiz
					(random, random)
					EKG Quiz
					Simulation
					Module Affective
					Evaluation
6	11	Mon	NAEMT - All Hazard Disaster	Morgan Young	AHDR Test
		(9 hr)	Response (AHDR)	(Paramedic)	DI
			Pharmacology Review ()		Pharmacology Quiz
					(random, random)
					EKG Quiz
		Thu	Ch 51 Digaster Danier Danier		Simulation Ch 51 Case Study
ĺ		Thu	Ch 51 - Disaster Response - Part		Ch 51 Case Study
		(4 hr)	1		

Module	Wk	Day	Description	Guest Instructor	Tests and Exams
			Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz
					Simulation
	12	Varies	At least one clinical shift		
		Thu (4 hr)	Ch 51 - Disaster Response - Part 2		Ch 51 Test
			Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz Simulation Module Affective Evaluation
7	13	Mon (9 hr)	NAEMT - Tactical Emergency Casualty Care (TECC) - Part 1	Morgan Young (Paramedic)	
		Thu (4 hr)	NAEMT - Tactical Emergency Casualty Care (TECC) - Part 2	Morgan Young (Paramedic)	
	14	Varies	At least one clinical shift		
		Thu (4 hr)	NAEMT - Tactical Emergency Casualty Care (TECC) - Part 3	Morgan Young (Paramedic)	TECC Test
			Pharmacology Review ()		Pharmacology Quiz (random, random) EKG Quiz Simulation Module Affective Evaluation
8	15	Mon (9 hr)	Ch 53 - Career Development		Ch 53 Case Study Ch 53 Test
			NIEMT Psychomotor Review	Mike Gooch (Paramedic Evaluator)	
					Pharmacology Quiz (random, random) EKG Quiz Simulation ARP Presentations
		Thu	One-on-one academic		Psychomotor Exam
		(4 hr)	counseling with each student		1 Sycholicol Exam
	16	Varies	At least one clinical shift		
		Thu (4 hr)	One-on-one academic counseling with each student		Module Affective Evaluation Final Exam
		Fri	Graduation Ceremony		
		(1 hr)			

APPLIED RESEARCH PROJECT - PART 3 OF 3

Part three of the Applied Research Project focuses presenting the findings from parts one and two. The final product should be in the form of both written documents and multimedia presentation. The completed part three of the Applied Research Project should be submitted in an electronic format (Microsoft Office is preferred). There is no minimum number of pages, but correct APA citations and bibliography, spelling, grammar, and punctuation is expected.

The following sections must be included:

Introduction/Abstract:

• Summarize all three papers in an abstract format. Should be self-contained so if the audience only reads this section, they will get all the information they need.

Discussion:

- Discuss the relationship between the literature review in the first paper and the research results in the second paper.
- Interpretation of all results and clearly state the implications for his/her organization.

Recommendations:

• Provide recommendations that flow from the data in the second paper and relate to the problem statement in the first paper.

Appendix:

• Provide a copy of the document or change recommended. This may be a policy, protocol, or other information that answers the problem statement.

References:

• Reference list in APA format.

Presentation:

- The final presentation should include information from all three papers with a heavy emphasis on recommendations. The target length of the presentation is 10 to 15 minutes (does not include questions or discussion at the end). The target audience of the presentation is your supervisor and/or decision makers at your organization that you are convincing to make the changes recommended from your research.
- Any method of presentation may be used including PowerPoint, dry-erase board, static display, handouts, video, hands-on, etc. Some form of audio/visual aid must be used.

<u>APPLIED RESEARCH PROJECT - PART 3 - GRADING RUBRIC:</u>

Section	Checklist	Evaluation
All sections	[] Correct grammar. [] Correct punctuation. [] Correct spelling. [] Correct sentence structure.	9 points possible in this section
Introduction/Abstract	 [] Correct APA format of citations throughout paper. [] Self-contained. [] Problem statement defined. [] Purpose statement defined. [] Research questions summarized. [] Procedures summarized. [] Results summarized. [] Recommendations summarized. 	20 points possible in this section
Discussion	 [] The relationship between the research results and the literature review is discussed. [] Author's interpretation of study results is presented. [] Organizational implications of results clearly stated. 	10 points possible in this section
Recommendations	 [] Recommendations logically flowed from the results. [] Recommendations were supported by the data collected. [] Recommendations provided for the organization and for future leaders. 	10 points possible in this section
Appendix	[] Final product(s) of research included.	50 points possible in this section
References	[] Correct APA format of reference section.	1 point possible in this section

APPLIED RESEARCH PROJECT - PRESENTATION - GRADING RUBRIC

Section	Checklist	Evaluation
	[] Problem statement defined.	10 points possible in this section
	[] Purpose statement defined.	10 points possible in this section
	[] Research questions summarized.	10 points possible in this section
	[] Procedures summarized.	10 points possible in this section
Presentation	[] Results summarized.	10 points possible in this section
	[] Recommendations summarized.	10 points possible in this section
	[] Stays within target time of 10-15 minutes.	10 points possible in this section
	[] Includes audio and/or visual.	10 points possible in this section
	[] Sufficiently persuasive.	20 points possible in this section

Sub-Section 3.490.66 - EMS 526 (Paramedic Field Experience) Course

PREREQUISITES:

Successful completion of

• Sub-Section 3.490.60 - EMS 516 (Paramedic Clinical Experience II) Course (page 189).

This course provides an opportunity for paramedic students to apply classroom knowledge to real-life situations and patients. Included in this course are assessment and treatment skills for obstetrics and pediatric patients. Additionally, assessment and treatment of pre-hospital patients are included in this course.

In order for an interfacility transfer to be documented as a patient contact in the field experience or field internship courses, the patient must be transferred to a higher level of care requiring assessment and may require emergency care.

If the minimum number of patient assessments and skills listed in Sub-Section 3.490.48 - Paramedic Academy Clinical Requirements (page 166) are not completed by the end of the minimum hours required, additional hours must be scheduled to meet the contact requirements.

DEADLINE:

All requirements for this course must be completed by the end of the third trimester.

AIR AMBULANCE:

- <u>Prerequisites</u>: Start third trimester.
- Location options: Cox Air Care (Bolivar or Springfield)
- Paramedic students will shadow flight paramedic.
- This is an optional clinical. If chosen, a maximum of 12 hours must be completed by the end of fourth trimester. A total of 100 hours must be completed between both air and ground ambulance.
- Student scheduling information:
 - Contact <u>susan.crum@coxhealth.com</u>.
 - Shifts are 8a-8p in Bolivar.
- Where to go: Bolivar Air Care Base.
- Administrative contact information: susan.crum@coxhealth.com

GROUND AMBULANCE:

- <u>Prerequisites</u>: Start third trimester and successfully complete ACLS course.
- Location options:
 - CMH EMS (Bolivar, Eldorado, Hermitage, Osceola, or Stockton)
 - Cox EMS (Ava, Crane, Greenfield, Marshfield, Ozark, or Springfield)
 - Mercy EMS (Buffalo, Camdenton, Carthage, Cassville, Lebanon, Macks Creek, Mt Vernon, or Springfield) *Must be a Mercy EMS employee to do ride time with Mercy.
 - Taney County Ambulance District (Branson, Hollister)
 - Warsaw-Lincoln Ambulance District (Warsaw)
- Paramedic students will shadow ground paramedic.
- Complete a minimum of 88 hours by the end of fourth trimester.
 - If Air Ambulance clinical time is not completed, a minimum of 100 hours on a ground ambulance must be completed by the end of the third trimester.
- Student scheduling information:
 - CMH: Contact ryan.mcdonald@citizensmemorial.com.
 - Cox: http://emsftep.wix.com/main (Admin contact Megan Wood 417-761-2945).
 - Mercy: Contact your direct supervisor at Mercy EMS.
 - TCAD: ?
 - WLAD: Contact Karen Orick at 660-438-2993 or korick@warsawems.com. One student at a time. Shifts start at 8a.

Sub-Section 3.490.68 - Paramedic Field Experience Evaluation Cards

Thank you for being a preceptor for a CMH paramedic field experience student.

For the student to get credit for completing this field experience, an evaluation must be completed by you.

Please go to the following link and complete the shift evaluation.

http://ozarksems.com/eval-clinical.php



Student name: Clinical date:		
Time in:	Time out:	
School contact for expo		

Paramedic students are to encouraged and allowed to perform the following skills:

- Advanced assessments
- 12-lead acquisition and interpretation
- Pharyngeal, blind-insertion, endotracheal, and cricothyrotomy airways
- Needle decompression
- Upper airway and tracheal suctioning
- CPAP and BiPAP
- Establish IV and IO access
- Maintain and utilize port or central line access
- Administration of any medication by any route
- Perform cardioversion, manual defibrillation, and transcutaneous pacing
- Manage OB and gynecological emergencies
- Manage adult cardiac arrests
- Manage the following TCD patients: STEMI, Stroke, Sepsis or Trauma
- Manage hazardous materials exposures and mass casualty incidents

Thank you for being a preceptor for a CMH paramedic field experience student.

For the student to get credit for completing this field experience, an evaluation must be completed by you.

Please go to the following link and complete the shift evaluation.

http://ozarksems.com/eval-clinical.php



Student name:		
Clinical date:		
Time in:	Time out:	

School contact for exposure or other reasons:

Theron Becker 417-597-3688

Paramedic students are to encouraged and allowed to perform the following skills:

- Advanced assessments
- 12-lead acquisition and interpretation
- Pharyngeal, blind-insertion, endotracheal, and cricothyrotomy airways
- Needle decompression
- Upper airway and tracheal suctioning
- CPAP and BiPAP
- Establish IV and IO access
- Maintain and utilize port or central line access
- Administration of any medication by any route
- Perform cardioversion, manual defibrillation, and transcutaneous pacing
- Manage OB and gynecological emergencies
- Manage adult cardiac arrests
- Manage the following TCD patients: STEMI, Stroke, Sepsis or Trauma
- Manage hazardous materials exposures and mass casualty incidents

Sub-Section 3.490.70 - EMS 536 (Paramedic Field Internship) Course

PREREQUISITES:

Successful completion of ALL classroom, laboratory, and clinical requirements of ALL previous paramedic courses including completion of:

- Sub-Section 3.490.64 EMS 521 (Third Trimester Paramedic) Course (page 197) and
- Sub-Section 3.490.66 EMS 526 (Paramedic Field Experience) Course (page 203).
- Complete the Platinum Adaptive Test with a "GOOD" summary score with the following settings:
 - Type: Timed Test
 - Curriculum: Educational Standards
 - Module: Comprehensive

This course serves as the capstone course for the paramedic program. It provides an opportunity for paramedic students to apply classroom knowledge to real-life situations and patients. Scene and patient assessment and management are developed and tested in this course as the student operates as the ambulance team leader.

DEADLINE:

All requirements for this course must be completed by the end of your fourth trimester.

ASSESSMENTS:

At the completion of all the requirements of this course, the student will be required to successfully pass an individual summative program evaluation once approved by his or her mentor. This summative program evaluation includes three components:

- 1. Cognitive assessment: Computer-based multiple-choice final exam covering all modules and chapters throughout the entire paramedic curriculum. Minimum passing score is 70% with the option to retest once (resulting average of first and second exam must be 70% or greater). Refer to Section 4.640 Academic Criteria: Grading and Examination Policies (page 90) for details.
- 2. Psychomotor assessment: Scenario-based skill and critical thinking evaluation utilizing a simulated patient situation with a random complex medical illness requiring assessment and treatment. A "pass" result must be obtained in this pass or fail assessment. The scenario will be evaluated by a minimum of three evaluators that may include, but not limited to: Medical Director, Program Director, Lead Instructor, Guest Instructors, EMS Director, ER Director, or TCD Coordinator.
- 3. Affective assessment: Interview-based evaluation of professional behavior. A "pass" result must be obtained in this pass or fail assessment. The interview will be conducted by one to three evaluators that may include, but not limited to: Medical Director, Program Director, Lead Instructor, Guest Instructors, or Preceptors. Refer to 3.330.83 Student Behavior Evaluation Form (page 77).

AMBULANCE TEAM LEADER:

- <u>Prerequisites</u>: Complete third trimester ambulance clinicals.
- <u>Location options</u>: Refer to Ground Ambulance locations in Sub-Section 3.490.66 EMS 526 (Paramedic Field Experience) Course (page 203).
- Objective: The student has successfully led the team if he or she has conducted a comprehensive assessment (not necessarily performed the entire interview or physical exam, but rather been in charge of the assessment), as well as formulated and implemented a treatment plan for the patient. This means that most (if not all) of the decisions have been made by the student, especially formulating a field impression, directing the treatment, determining patient acuity, disposition and packaging/moving the patient (if applicable). Minimal to no prompting was needed by the preceptor. No action was initiated or performed that endangered the physical or psychological safety of the patient(s), bystanders, other responders, or crew.
- Paramedic students will act as team leader directing an EMT and paramedic.
- Complete a minimum of 150 hours.
- Successfully assess and treat at least 20 ALS patients as team leader. An average CMH paramedic assesses and treats four (4) patients every ambulance shift.
- The last 18 of 20 attempted team leads must be successful.
- An ALS patient is defined as one that required and was provided at least one medication or at least one ALS intervention.
 - In order for an interfacility transfer to be documented as a patient contact in this course, the patient must be transferred to a higher level of care requiring ALS assessment and treatment(s).
 - After completion of the minimum number of hours, any patient encounter that is not an interfacility transfer may be counted as a team lead regardless of BLS or ALS interventions.
 - Team leads cannot be substituted with high fidelity simulations.
 - Every team lead patient encounter attempt in this phase must include documentation by both the preceptor and student.
- The first six (6) and last six (6) patients should be with the assigned mentor. Scheduling conflicts or other exemptions will be taken into account on a case-by-case basis.
- At the completion of this course, the mentor must approve the student's successful completion by completing the mentor final approval form. This approval covers cognitive, psychomotor, and affective domains.
- As part of the ALS team leader patients, successfully assess and treat two (2) critical patients as team leader. Critical patients are defined as requiring at least one of the following interventions and that was performed by the paramedic student:
 - Administration of Adenosine, TXA, vasopressor, medication requiring medical control, airway insertion, assist ventilation, chest decompression, childbirth, CPR, cricothyrotomy, electrical therapy, gastric tube, RSI, restraints, traction splint, TCD (STEMI, stroke, trauma, or sepsis), tourniquet, vagal maneuver, or IO access.

Sub-Section 3.490.72 - Paramedic Field Internship Mentor Approval Form

PART ONE - COMPLETED BY THE PARAMEDIC STUDENT

Things to consider when selecting a mentor: Your preceptor should be someone who challenges you to do your best and is not afraid to tell you where you need to improve. Learning and improving should make you uncomfortable. So, pick someone that intimidates you. When you are done with field internship, you want to look back and be proud of your success. This is arguably the most important part of your paramedic education.

Mentor's name:	
Mentor's email address:	
Mentor's cell phone number:	
All of the following must be true of your select	ted mentor.
☐ The mentor listed above is the type of paramular opportunities to accomplish at least 50 ALS ☐ The mentor listed above is NOT my friend ☐ The mentor listed above has NOT been one	le that is sufficient to provide me with S team lead calls. or relative outside of work.
Student's name:	
Student's signature:	Date:

<u>PART TWO - COMPLETED BY THE MENTOR'S</u> <u>CLINICAL/EDUCATION/QUALITY OFFICER</u>

Being a paramedic mentor is a serious commitment. Please help us ensure the highest quality of mentorship by completing this form.

Clinical officer's name:
Clinical officer's title:
Clinical officer's email address:
Please mark your opinions below as they relate to the mentor listed above:
 The mentor listed above is currently an FTO or preceptor for new hires in my organization. The mentor listed above is clinically competent and is fully knowledgeable about our protocols. The mentor listed above is a good employee and is fully knowledgeable about our policies and procedures.
Clinical officer's signature: Date:

PART THREE - COMPLETED BY THE MENTOR

Congratulations on being requested as a paramedic student mentor. The student has given you a significant compliment by indicating you are the type of paramedic they want to be. The goal of the field internship phase is to bridge the gap between the classroom and the practical parts of being a paramedic. Individual skills such as assessments, starting IVs, etc. should be adequate at this phase. Skills should not the focus of field internship. There are vital skills that cannot be honed in the classroom that should be the focus of field internship: self-awareness, critical thinking, decision making, verbal communication, and self-confidence.

Please keep in mind that students need the opportunity to succeed or fail. Your job as mentor is to create space and time for the student to perform. Student actions may only be mediocre at this point and that is OK as long as crew or patient safety is not being compromised.

Please score the student's lowest performance. Rate the result, not the effort the student. The student should be responsible for the call from the start to the end (including routing to the call, staff interaction, and documentation). Please allow and encourage the student to document the call in your ePCR software. You may delete the report and generate your own, append your comments to the bottom, and/or review and approve the report as is with your signature.

If you find that your student needs a lot of prompting, they are not ready for field internship. Have that conversation with the student and feel free to contact the lead instructor with your comments. It is absolutely OK to require more field experience time (ambulance ridealong where they are not team lead) before they continue to field internship.

Requirements of a mentor:

- Preceptor education is required. If you have already completed education such as FTO, preceptor, or field instructor, please attach a copy of that certificate to this form. If not, you will be assigned an online preceptor education on the Platinum Planner website that will need to be completed before the student's mentorship starts.
- Multiple forms will need to be completed to document the student's performance.
 - After each patient contact, the following form will need to be completed. http://ozarksems.com/eval-clinical-team-lead.php
 - After each shift, the following form will need to be completed. http://ozarksems.com/eval-clinical.php
 - After successfully completing field internship and being released to test at NREMT, the following form will need to be completed. http://ozarksems.com/evalclinical-mentor-final.php

Given al	l above, if you	agree to be	paramedic	mentor to	the student	listed, p	lease sign	and
date below.								

Mentor's signature:	Date:
_	

Feel free to contact the lead instructor at any time (417-597-3688, theron.becker@citizensmemorial.com). Thank you for your dedication to our profession.

Sub-Section 3.490.74 - Paramedic Field Internship Evaluation Cards

Thank you for being a preceptor for a CMH paramedic field internship student. For the student to get credit for completing this field internship (HOURS), an evaluation must be completed by you. Please go to the following link and complete the shift evaluation. http://ozarksems.com/eval-clinical.php	For the student to get credit for completing this field internship (TEAM LEAD), an evaluation must be completed by you. Please go to the following link and complete the team lead evaluation. http://ozarksems.com/eval-clinical-team-lead.php Notes:
Student name: Clinical date: Time in: School contact for exposure or other reasons: Theron Becker 417-597-3688	
Thank you for being a preceptor for a CMH paramedic field internship student. For the student to get credit for completing this field internship (HOURS), an evaluation must be completed by you. Please go to the following	For the student to get credit for completing this field internship (TEAM LEAD), an evaluation must be completed by you. Please go to the following link and complete the team lead evaluation.
link and complete the shift evaluation. http://ozarksems.com/eval-clinical.php Student name: Clinical date: Time in:Time out:	http://ozarksems.com/eval- clinical-team-lead.php Notes:

Sub-Section 3.490.76 - Paramedic Academy Terminal Competency Form

Citizens Memorial Hospital - Emergency Medical Services Education Department hereby certifies that the candidate listed below has successfully completed all the terminal competencies required for graduation from the Paramedic education program as a minimally competent, entrylevel Paramedic and as such is eligible for State and National Certification written and practical examination in accordance with our published policies and procedures.

Name of graduate:
Graduate email:
 □ Completed written examinations □ Affective learning domain evaluations □ Practical skill sheets (includes all required skill sheets) □ Passing overall score (80% min) □ Clinical tracking records (includes required hours, areas, procedures, patient contacts, etc.) □ Academy hours status report attached □ Academy team-lead status report attached □ Platinum skills report attached □ Student counseling (as applicable). Notes: □ Required course certifications: □ ACLS
☐ PALS ☐ Field Internship mentor approval form ☐ Fourth trimester post-field internship exams ☐ Cognitive ☐ Affective ☐ Psychomotor ☐ Medical Director interview
Program requirements successfully and fully completed on:
Medical Director signature:
Program Director signature:
After graduation outcomes are entered into academy graduates database.
Calendar reminder set to send surveys six (6) months after state licensure. Date:

Section 3.560 - Critical Care Paramedic Academy



This Academy and associated Courses are pending development.

Sub-Section 3.560.33 - EMS 601 (CCP Academy) Course

Sub-Section 3.560.66 - EMS 606 (CCP Clinical Experience) Course

Section 3.630 - Community Paramedic Academy



This Academy and associated Courses are pending development.

Sub-Section 3.630.33 - EMS 701 (CP Academy) Course

Sub-Section 3.630.66 - EMS 706 (CP Clinical Experience) Course

Section 3.700 - CMH EMS Employee Onboarding Academy



This section serves as the course syllabus for the EMS Onboarding Academy.

Sub-Section 3.700.08 - Welcome

Welcome to Citizens Memorial Hospital - Pre-Hospital Services (CMH EMS). This syllabus is designed to facilitate your successful integration into our family. If you are new to EMS, welcome to your favorite job you will ever have. If you are old to EMS (seasoned), CMH is a great place to work and we look forward to your contribution. Jobs come and go, but we hope you decide to make a career at CMH EMS.

Sub-Section 3.700.16 - EMS Onboarding Packet

This packet is only part of your orientation requirements. Checklists and assignments have been (or will be) assigned to your HealthStream and Platinum Education. HealthStream is used by all hospital employees to verify competence. Platinum Education is used by CMH EMS Education to track student and new hire progress. Each shift, you will work on these checklists. At the end of each shift, checklists should be completed and submitted by your FTO. Your orientation is not complete until all completed checklists and assignments are completed.

Sub-Section 3.700.24 - Onboarding Documentation Software

Platinum Planner will be used to document and track skills, labs, scenarios, simulations, and clinical contacts. It is the new hire's responsibility to complete documentation.

PLATINUM PLANNER SIGNUP DIRECTIONS:

- 1. Go to http://platinumed.com and click on "Create student account."
- 2. Complete the form. Enter the course code <u>U7JUR</u>.
- 3. Check your email and activate your account following the directions in the email.

DOCUMENTING YOUR ONBOARDING PROGRESS DIRECTIONS:

- 1. Select "Reports" "Progress Report" to view all the hours and topics required.
- 2. Select "Labs" "My Labs" "Create A New Lab" to create a place to add lab skills.
 - Select "Add/Remove Skill(s)" "All Classifications" to add items that need to be checked off.
 - Note: You are required to do all your own documentation for all skills except for those skills that begin with "Clinical."
 - Select each item, then "Add New Attempt" to actually document completing that item.
 - Select "Submit Lab" to finalize for approval and to get credit.
 - Repeat this process until all lab requirements in your Progress Report show 100%.
- 3. Select "Opportunities" "My Opportunities" "Create Opportunity" to create a place to add your ambulance shifts
 - Select your preceptor's name.
 - You must add a patient encounter to add items to the opportunity that need to be checked off.
 - Obtain your preceptor's signature and submit documentation for approval to get credit.
 - Repeat this process for every ambulance shift.

CAPSTONE SHIFT DIRECTIONS:

- 1. Create an Opportunity just as listed above.
- 2. Print and bring to your shift your Progress Report showing every item with 100% completed except for those that start with "Manager."
 - If you do not have 100% on each item, contact your manager and schedule an additional shift prior to your capstone shift to get everything completed.

Sub-Section 3.700.32 - Tips for New Hires

POSITIVE:

- Be nice, but have a thick skin.
- Skills and ability are good, but attitude and habits make or break you.

RESPECTFUL:

- Take care of yourself, your family, your co-workers, and your patients (in that order).
- Your previous knowledge and experience is very valuable, however, please be patient and attentive with people that want to teach and show you the CMH-way.
- If you are going to be late to your shift, please ensure the supervisor, your partner, your FTO (if applicable), and the person you are relieving are notified.

INNOVATIVE:

- Learn from your mistakes.
- Use down-time (both on and off the clock) to learn policies, protocols, and navigation.
- Never stop learning and challenging yourself.

DEDICATED:

- Be prepared and carry the tools of the trade. Also, be proficient in how to use them: Pen, watch with a second hand, stethoscope, and flashlight.
- Show up early and be prepared to leave late.
- Your ambulance is your office, be proud of it. Make sure it is stocked and clean at all times.
- Carry extra clothes in your car to change into if things get messy on your shift.

EMPOWERED:

- Be confident, we've got your back.
- Don't be afraid to ask for assistance.
- Don't be a victim of "social media assisted career suicide."

Sub-Section 3.700.40 - CMH EMS History

Please review our history to have a better understanding of our culture.

- <u>Unknown</u>: Funeral homes traditionally transported ill people to hospitals. Polk County Ambulance Service was formed and funeral homes no longer transported live people in Polk County.
- <u>Unknown</u>: Countywide Ambulance Service began operating on a subscription membership basis.
- <u>Unknown</u>: Polk County Ambulance Service and Countywide Ambulance Service both went out of business.
- 1970's: Humansville Hospital closed.
- <u>1982</u>: Citizens Memorial Hospital formed.
- 1985: CMH began providing EMS services with a contribution from the Dunnegan family (why it is called Dunnegan Critical Care Unit) with Mike Moore as director. Several people transitioned through CMH EMS Director in the early years; including Linda Harris, Charlie Blake, Drew Alexander, Carol Nichols, and Steve Shelton.
- 1985: CMH's first ambulance arrived before equipment was available, so it was traded to Cox in Springfield as their ambulance was not to arrive until later. Cox's ambulance arrived and was placed in service. It was later given to Cedar County First Responders and is still in service with Stockton Fire Department.
- 1985: CMH purchased two sets of hydraulic extrication tools, scene lighting, rope rescue, and water rescue equipment. This equipment was kept on each ambulance. One set of rescue equipment was given to Polk County Rescue and one set given to Pleasant Hope Fire Department. When Polk County Rescue disbanded, most of that equipment was passed to Central Polk County Fire Rescue.
- 1986: CMH EMS began covering Hickory County.
- 1990: Mike Moore becomes Director of CMH EMS... again.
- 1991: CMH EMS establishes CMH Fleet Services with George Watson as Director. Has grown from just servicing ambulances to maintaining all 90 CMH vehicles.
- 1992: Neal Taylor becomes Director of CMH EMS.
- 1995: CMH initiated a 9-1-1 answering point for Polk County staffed with Emergency Medical Dispatcher (EMD) and dispatched ambulances and county fire departments from CMH campus. This service replaced the various 7-digit emergency numbers and Polk County Sheriff (PCSD) dispatching ambulance and fire departments. PCSD continued dispatching deputies and Bolivar Police Department (BPD) continued dispatching police and Bolivar Fire Department (BCFD).
- <u>1998</u>: Jim Bayer becomes Director of CMH EMS.
- 1999: Steve Keller becomes Director of CMH EMS.
- <u>2000</u>: Polk County Central Dispatch (911) formed and began dispatching for all agencies in Polk County.
- <u>2005</u>: Rick Seiner struck and killed by an automobile on Highway 13 at the scene of an MVA while working for CMH EMS as an EMT.
- 2010: Kerri Schiegoleit becomes Director of CMH EMS.
- 2011: Neal Taylor becomes Director of CMH EMS... again.

- 2012: CMH EMS acquired contract for EMS services for Cedar County.
- 2014: Sac Osage Hospital closed. CMH EMS began providing ambulance service to St Clair County.
- 2017: EMS Education Department created. CMH Paramedic education program accredited.

Sub-Section 3.700.48 - EMS Onboarding Academy Faculty

MEDICAL DIRECTOR

Tony Cauchi, MD is a board certified emergency medicine physician. Dr. Cauchi attended medical school at Texas Tech University and completed his internship and residency at Michigan State University. He is currently the Chief Medical Officer for Triad Physician Solutions, a physician in the US Army, and the medical director for Citizens Memorial Hospital Emergency Room.



EMS DIRECTOR

Neal Taylor, AAS-EMT, EMT-P is the Director of EMS and has been with CMH EMS since 1986. Neal started as an EMT in Hickory County and has since worked for both Cox Air Care and St. John's / Mercy Lifeline as a flight paramedic. He has been director of CMH EMS twice and is an avid coffee connoisseur.



PROGRAM DIRECTOR

Theron Becker, MMPA, EFO, BS-FPE, NRP is a Nationally Registered Paramedic. Mr. Becker is the Director of the EMS Education Department at Citizens Memorial Hospital. Theron got his EMT license in 1995 while attending the Fire Engineering program at Oklahoma State University. Since then, he has obtained a Master degree in public administration management and Executive Fire Officer from the National Fire Academy.



Theron has been a volunteer firefighter since he was 16 years old in SW Missouri and has been employed on hazmat teams, as a fire protection engineer, and in public health in bioterrorism preparedness.

Full bio and curriculum vitae can be found here: http://ozarksems.com/theron-resume.php

LEAD INSTRUCTOR - POLK COUNTY

Aaron Weaver, EMT-P is the Manager of Polk County and has been with CMH EMS since 1996. Aaron started as a first responder in the Humansville area when he was 14 years old. When he is not at work, Aaron is an avid diver and SCUBA instructor.



LEAD INSTRUCTOR - HICKORY COUNTY

Alice Roberts, EMT-P is the Manager of Hickory County and has been with CMH EMS since 2002.



LEAD INSTRUCTOR - CEDAR COUNTY

Thomas Ryan, EMT-P is the Manager of Cedar County and has been with CMH EMS since 2013.



LEAD INSTRUCTOR - ST CLAIR COUNTY

John Frazer, EMT-P is the Manager of St Clair County and has been with CMH EMS since 2016.



CLINICAL COORDINATOR

Goldie Masters, AASMA, is a Nationally Registered EMT who has been with CMH EMS since 2014 and has been a CMH employee since 2005.



Sub-Section 3.700.56 - Station Locations



Bolivar

1525 N Oakland Ave, Bolivar, MO 65613 37.627542, -93.423696 https://map.what3words.com/trill.poems.clearly





Hermitage

121 Jackson St, Hermitage, MO 65668 37.941971, -93.315745 https://map.what3words.com/respite.clutching.c hest





Stockton

319 W Englewood, Stockton, MO 65785 37.687270, -93.801351 https://map.what3words.com/grammar.motels.v erge



El Dorado Springs

722 E Hwy 54, El Dorado Springs, MO 64744 37.862373, -94.013977 https://map.what3words.com/chef.tilting.glazes





Osceola

700 Giesler Dr, Osceola, MO 64776 38.052007, -93.688791 https://map.what3words.com/fusion.owner.fizzy



Sub-Section 3.700.64 - Important Phone Numbers and Codes

BOLIVAR AREA:

 CMH Ash Grove Healthcare door codes 	(outer door) 1234, (inner door) 5439
• CMH EMS Bolivar auxillary bay door code	1400
CMH EMS Bolivar crew rooms	417-328-6354
CMH EMS Bolivar door code	241
CMH EMS Bolivar offices	417-328-6348
CMH EMS Bolivar stock room door code	342
CMH EMS director	417-328-6358
CMH ER door code	6301#
• CMH ER	417-328-6301
CMH ICU door code	5548#
Colonial Springs door code	1102*
Cox EMS dispatch	417-269-3773
Cox North ER	417-269-3393
Cox South ER door code	0318
Cox South ER	417-269-4983
Cox South switchboard	800-362-6264
• Dallas County Dispatch non-emergency	417-345-1999
Mercy EMS dispatch	417-820-3003
Mercy Springfield EMS Supervisor	417-844-4422
Mercy Springfield ER door code	3002
Mercy Springfield ER	417-820-2115
Mercy Springfield switchboard	417-820-2000
Missouri Child Abuse Hotline	800-392-3738
Missouri Elder Abuse Hotline	800-392-0210
Missouri Highway Patrol Troop D	417-895-6888
• Missouri Poison Control Center (Healthcare Ho	otline)888-268-4195
• Polk County Central Dispatch non-emergency	417-777-3911
Willard Care Center door code	379
HERMITAGE AREA:	
Camden County Dispatch non-emergency	
 Christian Healthcare Special Care Unit door coo 	
CMH EMS Hermitage	
 Hickory County Dispatch non-emergency 	417-745-6415

STOCKTON AREA:

Cedar County Dispatch non-emergency	417-276-5133
CMH EMS Stockton	
Dade County Dispatch non-emergency	
Dade County Nursing Home door code	
Good Sheppard Nursing Home door code	
Lake Stockton Healthcare Facility door code	
EL DORADO SPRINGS AREA:	
Barton County Memorial Hospital ER door code	5207*
Barton County Memorial Hospital Switchboard	417-681-5100
Cedar County Memorial Hospital ER door code	
Cedar County Memorial Hospital Switchboard	417-876-2511
CMH EMS Eldorado	
Freeman West ER door code	0704*
Mercy Joplin ER door code	
Ozark Medical Center ER door code	
Osceola area:	
CMH EMS Osceola	417-646-2257
Golden Valley Memorial Hospital ER	
St Clair County Dispatch non-emergency:	

Sub-Section 3.700.72 - Demographic Form

Last name:	DSN (assigned):
First name:	CMH employee number:
Home physical address (street, city, state, zip):	CMH employee username:
	Mobile phone number:
Home email address:	Emergency contact name:
	Emergency contact phone number:
Google username if email above is not Gmail:	FCC call sign (amateur radio):
Once completed:	
☐ Fax this form to Polk County Central ☐ Give this form to the Director of EMS ☐ Attach all copies of certificates and	Education

Sub-Section 3.700.80 - EMS 801 (FTO Academy) Course

New hire's name:		
Hospital Orientation		
Date:		
EMS Orientation Note: The three sessions below shift	are four-hours each and can be	accomplished in one 12-hour
Office date:	Office preceptor:	
Classroom date:	Classroom preceptor:	
Driving date:	Driving preceptor:	
This phase is not required for curr	eted prior to 90 days past the Ho rent EMT employees that have com ip mentor is a CMH Paramedic and	pleted CMH's Paramedic
Shift 1 date: (Bolivar)	Shift 1 preceptor:	Shift 1 location: Bolivar
Shift 2 date: (24-hour station)	Shift 2 preceptor:	Shift 2 location:
Shift 3 date: (Home station)	Shift 3 preceptor:	Shift 3 location:
Shift 4 date: (Home station)	Shift 4 preceptor:	Shift 4 location:
Shift 5 date: (Bolivar)	Shift 5 preceptor:	Shift 5 location: Bolivar
EMS Evaluation		
Shift date:	Manager preceptor:	Location:
EMS Remediation		
Shift date(s):	Preceptor(s):	Location(s):

Sub-Section 3.700.88 - New Hire Clinical Evaluation Cards

Thank you for being a preceptor for a CMH new hire employee.

For the employee to get credit for completing this clinical, an evaluation must be completed by you.

Please go to the following link and complete the shift evaluation.

http://ozarksems.com/eval-clinical.php



Employee name:Clinical date:	
Time in:	Time out:
School contact for expose Theron Becker 417-597	

EMT new hires are encouraged and allowed to perform all the EMT skills allowed in protocols.

AEMT new hires are encouraged and allowed to perform all the AEMT skills allowed in protocols.

Paramedic new hires are encouraged and allowed to perform all the Paramedic skills allowed in protocols. Leading the team is expected at some point before the end of orientation.

Thank you for being a preceptor for a CMH new hire employee.

For the employee to get credit for completing this clinical, an evaluation must be completed by you.

Please go to the following link and complete the shift evaluation.

http://ozarksems.com/eval-clinical.php



Employee name:_	
Clinical date:	
Time in:	Time out:

School contact for exposure or other reasons:

Theron Becker 417-597-3688

EMT new hires are encouraged and allowed to perform all the EMT skills allowed in protocols.

AEMT new hires are encouraged and allowed to perform all the AEMT skills allowed in protocols.

Paramedic new hires are encouraged and allowed to perform all the Paramedic skills allowed in protocols. Leading the team is expected at some point before the end of orientation.

Section 3.770 - Supervising Officer Academy



This Academy and associated Courses are pending development.

Sub-Section 3.770.50 - EMS 901 (SPO Academy) Course

Section 3.840 - Managing Officer Academy



This Academy and associated Courses are pending development.

Sub-Section 3.840.50 - EMS 1001 (MPO Academy) Course

Section 3.910 - Executive Officer Academy



This Academy and associated Courses are pending development.

Sub-Section 3.910.50 - EMS 1101 (EPO Academy) Course

Part 4 - Appendix

Section 4.240 - References

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Version 11 (8/1/19) Mission: Updated: 8/23/2019 Emergency Medical Technicians: https://content.nremt.org/static/documents/Paramedic_Psychomotor_Competency_Portfol io Manual v4.pdf

Section 4.480 - Change Log

Sub-Section 4.480.01 - Version 1 (Aristotle)

Version One is named in dedication to Aristotle who was a Greek philosopher and scientist who studied almost every subject, and his combined works constitute a virtual encyclopedia of knowledge.

Sub-Section 4.480.02 - Changes from Version 1 to Version 2 (Browne)

Version Two is named in dedication to Marjorie Lee Browne who was an American mathematics educator who was one of the first African-American women to receive a doctorate in mathematics.

Section	Date	Description
Entire document	1/18/16	Updated all position titles based on current personnel in place.
		Replaced references to Pre-Hospital with EMS. Re-numbered and formatted entire document
		to align with other EMS department document standards.
Part 2 - Physical Facilities	1/18/16	Updated classroom and equipment descriptions after moving facilities.
Part 3 - Program Evaluations	1/18/16	Updated links to online content. Updated evaluation form to include online content.
Part 4 - Policy Manual	1/18/16	Updated links to online content.
Section 4.240 - Refund Policy	1/18/16	Updated refund policy to reflect one-day courses.
Section 4.320 - Attendance Policy	1/18/16	Updated tardy policy and updated uniform polo shirt.
Section 4.400 - Class Cancellation Policy	1/18/16	Removed reference to school cancellation.
Section 5.770 - Student Transcripts	1/18/16	Updated sample certificate to reflect actual certificate being issued.
Part 6 - Program Details	1/18/16	Updated all programs with current requirements for clinicals and procedures.
Section 5.770 - Student Transcripts	1/18/16	Updated FTO program to reflect current program details as approved by EMS director.
Part 6 - Program Details	1/18/16	Updated documents.
Section 6.840 - Field Training Officer	1/18/16	Added this section to move these documents out of MO BEMS document section. Updated
(FTO) Training Program		all documents.

Sub-Section 4.480.03 - Changes from Version 2 to Version 3 (Confucius)

Version Three is named in dedication to Confucius who was a Chinese teacher and philosopher dedicated to personal morality, correctness of social relationships, and justice.

Section	Date	Description
Section 1.100 - Mission Statements		Added CMH and EMS department mission and vision to justify the need for quality training.
Section 1.500 - Training Budget		Added this section.
Section 1.600 - Medical Director	1/21/16	Added link to reference Section 7.120 - MO BEMS documents
Section 4.080 - Admission Criteria	1/21/16	Added comment about student IDs through the HR department and criminal background
		checks.
	7/8/16	Added comment about the online registration process.
Section 4.120 - Non-Discrimination	8/17/16	Added this section.
Section 4.160 - Course Fees	8/17/16	Added comment that 50% of course fees are due the first day of class.
		Added specific course fees for offered courses.
Section 4.280 - Student Withdrawal Policy	1/21/16	Split the previous section into two to separate refund and withdrawal policies.
Section 4.320 - Attendance Policy	10/20/16	Specified "unexcused absesences" in a few locations.
Section 4.360 - Dress Code		Split the previous section into two to separate attendance and dress code policies. Added comment that employees cannot wear employee uniform while acting as a student. Added comment that students must meet CMh jewelry and tattoo policies.
	7/8/16	Added more strict uniform requirements. Removed option to wear t-shirts and shorts. Added jewelry and tattoo policy details.
	8/17/16	Added comment that uniform cannot be worn outside class activities. Added details of polo style and colors.
Section 4.400 - Class Cancellation Policy	1/21/16	Added comment that students will be contacted via email and text if the class is canceled.
Section 4.440 - Academic Integrity		Added this section.
Section 4.560 - Appeal and	1/21/16	Added comment about unresolved grievance process and all requests must be made in writing.
Grievance Procedure		
Section 4.640 - Academic Criteria:		Expanded grade list to include all the "+" and "-" grades.
Grading and Examination Policies		Added comment that 70% is the lowest grade on any single test.
Section 4.880 - Certification	1/21/16	Added comment about Missouri scope of practice and licensing requirements. Added comment
Requirements		about NREMT eligibility to test requirements.
Section 4.920 - Photo and Video Release	8/17/16	Added this section.
Section 4.940 - Authorization for Release of Information	8/17/16	Added this section.
Section 4.960 - Policy Manual Acknowledgment	8/17/16	Added this section.
Section 6.060 - Clinical Agreements	1/21/16	Added this section to have a location to place signed agreements.
	8/17/16	Added health department clinical agreement.
Section 6.120 - Emergency Medical	1/21/16	Added specifics for the curriculum used.
Responder Program [EMR Academy]		Modified when ID badge should be worn.
	8/15/16	Added public health clinical requirements.
Section 6.240 - Emergency Medical	1/21/16	Added specifics for the curriculum used.
Dispatch Program [EMD Academy]	7/8/16	Modified when ID badge should be worn.
Section 6.360 - Emergency Medical	1/21/16	Added specifics for the curriculum used.
Technician Program [EMT	7/8/16	Modified when ID badge should be worn. Added comment that other clinical sites can be
Academy]		considered. Added program prerequisites and program details sections (including generic
	0/4 = /4 -	timeline). Added application form.
		Added public health clinical requirements.
		Added simulation activity requirements.
	10/20/16	Reduced 9-1-1 clinical time to 6 hours. Added prerequisites for starting different clinicals.
G .:	2/0/16	Added deadlines to complete clinical hours. Added criminal history consent form.
Section 6.840 - Field Training Officer (FTO) Training Program	2/9/16	Re-organized rider rules. Added requirements for age. Added station addresses. Added typical shift times.
officer (r 10) framing rrogram	8/17/16	Added comment that riders should plan on bringing money or packed lunch to ambulance
	10/20/16	clinicals. Aligned BLS and ALS CES prerequisites with changes to CMH policies.
	10/20/10	Angued DES and AES CES prerequisites with changes to Civin policies.

Sub-Section 4.480.04 - Changes from Version 3 to Version 4 (Deming)

Version Four is named in dedication to W. Edwards Deming who was an American engineer, statistician, professor, author, lecturer, and management consultant who is considered the master of continual quality improvement.

Section	Date	Description
Part 0 - Front Matter	1/26/17	Added mission statements and logo.
Section 1.100 - Mission Statements	1/29/17	Added EMS and EMS Education mission statements.
Section 1.400 - Organizational Chart	1/29/17	Updated org chart.
Section 1.500 - Training Budget	1/29/17	Added 2017 budget request.
Section 2.330 - Classroom Descriptions		Added Bolivar Technical College informal agreement.
Section 2.660 - Available Equipment and Supplies	1/29/17	Added training ambulance.
Section 3.330 - Student evaluations	1/29/17	Added reference to electronic testing.
Section 3.660 - Instructor and Course Evaluations	1/29/17	Replaced written form with link and description of online evaluation
		form.
Section 4.080 - Admission Criteria	1/29/17	Added indication of possible applicant entrance exam.
Section 4.160 - Course Fees	1/29/17	Added course fees for paramedic and refresher courses.
Section 5.840 - Sample Certificate of Completion	1/29/17	Updated sample certificate.
Section 6.060 - Clinical Agreements	1/29/17	Added scanned signatures for CMH Pre-Hospital, CMH ER, and Polk
		County Health Center.
Section 6.360 - Emergency Medical Technician Program	1/29/17	Reduced dispatch clinical requirement to four hours.
[EMT Academy]	2/1/17	Changed "EMS Academy" to "EMT Academy."
Section 6.600 - Paramedic Program (Paramedic Academy)	2/1/17	Added paramedic academy information
Section 7.120 - MO BEMS documents	1/29/17	Added 2016 BEMS annual report.

Sub-Section 4.480.05 - Changes from Version 4 to Version 5 (Escalante)

Version Five is named in dedication to Jaime Escalante who was a Bolivian educator known for teaching students calculus from 1974 to 1991 at Garfield High School, East Los Angeles, California. He was the subject of the 1988 book Escalante: The Best Teacher in America and the 1988 film Stand and Deliver. One of his notable quotes is: "The key to my success with youngsters is a very simple and time-honored tradition: hard work for teacher and student alike."

Section	Date	Description
Entire Document		Several additions of policies and documents to comply with CoAEMSP accreditation application.
Entire Bocument		Added QR codes throughout document where internet links were already located.
Section 0.500 - Scope		Added CoAEMSP definition of profession.
Section 1.100 - Mission		Added EMS Education vision statement.
Statements	4/4/1/	Added ENIS Education Vision statement.
Section 1.400 -	4/4/17	Updated org chart.
Organizational Chart	4/4/1/	opulated of genari.
Section 1.600 - Medical	4/11/17	Corrected a typo on 1.600.50.
Director		Added responsibilities and qualifications for NAEMT PHTLS. Modified appointment and acceptance letters
Birector	// 1 1/ 1 /	from Dr. Roger Merk to Dr. Megan Carter. Added new CoAEMSP change in medical director form for Dr.
		Carter. Changed all licenses and certifications to Dr. Carter.
Section 1.650 - Faculty,	3/7/17	Added copies of instructor certifications.
Program Director	3/ //1/	Added copies of instructor continuations.
Section 1.675 - Faculty,	3/7/17	Added copies of instructor certifications.
EMT Academy Lead	3/ //1/	Added copies of instructor continuations.
Instructor		
Section 1.725 - Faculty,	3/7/17	Added FTO curriculum and lists of FTOs in all previous years.
Clinical Education	5. ,. 1 ,	- Law of 1 to control and and and are provided years.
Specialists		
Section 1.750 - Faculty,	3/13/17	At the advice of BEMS inspection, added curriculum vitae for all guest instructors. Still working on adding
Guest Instructors	5, 15, 1,	vitae for all instructors.
	3/27/17	Added Bill Gray CV.
		Corrected a typo on Brooks, Jason CV.
		Added Neal Taylor CV.
Section 1.900 EMS		Added Tregg Garen and Alicia Zacker. Added email address for all members of the board.
Education Advisory		Added advisory board member's email addresses. Added Tregg Geren and Alicia Zacher to advisory board.
Board		Replaced Dr. Merk with Dr. Carter.
Section 3.330 - Student		Added date and times to hand-out cards. Created cards for each level of student with descriptions of skills
evaluations	5.0.17	and abilities for each. Created medic team lead individual call evaluation form. Created medic team leader
		mentor final sign-off evaluation form.
	4/4/17	Corrected some typing errors.
		Added instruments to evaluate affective domain. Added process to perform annual test item analysis.
Section 3.990 - Employer		Added this section.
Survey	,	
Section 4.160 - Course	5/1/17	Updated course fees with discounts for partner and volunteer agencies.
Fees		- L
Section 4.640 - Academic	7/11/17	Added comment that in the absence of a test, score will be based on percentage of attendance.
Criteria: Grading and		, 1 5
Examination Policies		
Section 4.680 - Remedial	3/7/17	Added this section for compliance with BEMS inspection checklist.
Education		·
Section 4.880 -	4/4/17	Added links to terminal competencies and added Limmer document "Trouble Passing NREMT?"
Certification		
Requirements		
Section 5.490 - Initial	3/7/17	Added this section to comply with BEMS inspection checklist.
Course Records		
Section 6.030 - Generic	3/6/17	Added this section.
Educational Calendar		
Section 6.060 - Clinical	3/1/17	Added signed clinical agreements from the following CMH departments: Anesthesia, Cardiology, Geriatric
Agreements		Psych, ICU, L&D, Laboratory, RT Surgery.
	3/1/17	Added signed clinical agreement from CMH Infusion Center.
	3/6/17	Added CMH Infusion Center agreement.
	4/4/17	Added Polk County Central Dispatch signatures.
	4/25/17	Added clinical details for each clinical agreement.

Section	Date	Description
	5/2/17	Added agreements for Bolivar Family Care Center, Bolivar Walk-In Clinic, and Dallas County Walk-In
		Clinic, Mercy ER, and Mercy EMS. Made adjustments to Pediatric Walk-In Clinic agreement to reduce
		hours to 10 and allow for other locations.
		Added signature for CMH Pediatric Walk-In Clinic.
		Added signature for CMH Dallas County Walk-In Clinic.
	6/8/17	Added signed clinical agreement from Mercy EMS.
Section 6.090 -	4/11/17	Created this section and added SBU Articulation Agreement.
Articulation Agreements		
		Added Mr. Babb signature.
Section 6.120 -		Added CoAEMSP definition of EMR.
Emergency Medical	4/4/17	Removed ER and Health Department clinical requirements. Reduced number of medical and trauma patients
Responder Program		from three each to one each.
[EMR Academy]	7/14/17/	Changed textbooks from Pearson to Jones and Bartlett (AAOS).
Section 6.360 -	3/3/17	Modified course timelines to be more generic with alignment to weeks only and reference to annual calendar
Emergency Medical	2/6/17	section.
Technician Program [EMT Academy]	3/6/17	Added CoAEMSP definition of EMT. Added comment to functional abilities that job requirements are often
[EWIT Academy]	4/4/17	higher. Moved general clinical requirements (patient contacts) to general section. Added SBU Articulation Agreement details for transferring credits. Added comment than you may take
	4/4/1/	FISDAP unit tests twice.
	4/12/17	Adjusted tuition details to reflect updated costs and aligned deadlines with course start dates.
		Updated terminal competency form to be more useful after using it with current EMT Academy.
		Removed references to DT4EMS as we will no longer be offering this course. Changed references from
	5/6/1/	EVDT to EVOS. Changed references from TCCC to TECC.
	6/13/17	Updated background check authorization form for the new company human resources is using.
		Added affective domain evaluation at midterm and final.
		Changed textbooks from Pearson to Jones and Bartlett (AAOS).
Section 6.480 - Advanced		
EMT program	5, 0, 1,	
Section 6.600 - Paramedic	2/5/17	Continued to add details to paramedic academy.
Program (Paramedic		Modified course timelines to be more generic with alignment to weeks only and reference to annual calendar
Academy)		section.
	3/6/17	Added CoAEMSP definition of paramedic. Added definitions and minimum requirements for each pediatric
		age sub-category. Added clarification that for a patient contact during an interfacility transfer to be counted,
		it must be transferred to higher level of care requiring an assessment. Added comment to functional abilities
		that job requirements are often higher. Moved general clinical requirements (assessments and skills) to
		general section.Increased minimum intubations from six to ten. Added prerequisites for all classes. Changed
		laboratory clinical to infusion center. Changed ER triage time to 12 hrs, ER to 122 hrs, Cath Lab to 8 hrs.
		Added requirement for two live births. Added pediatric age sub-groups. Added definition of ALS patient.
	2/27/17	Added minimum of first ten and last ten team lead calls should be with mentor.
		Added A&P Syllabi
	4/4/17	Added research assignment requirement. Added advanced placement information for military medics. Added SBU Articulation Agreement details for transferring credits. Added comment than you may take FISDAP
		unit tests twice. Updated clinical age brackets to match those in FISDAP.
	4/11/17	Added Bill Gray photo to 6.600.12. Added section containing transfer credit information for A&P.
		Updated terminal competency form to be more useful after using it with current EMT Academy.
		Updated program goal to be verbatim CAAHEP standard.
	5/2/17	Adjusted hours in walk-in clinics and ER (10 hours in clinc and 124 in ER). Clarified in all clinical sections
	3/2/1/	to specify which locations are allowed clinical time.
	6/8/17	Added clarification on Letter of Review from CoAEMSP according to email received from CoAEMSP.
		Updated background check authorization form for the new company human resources is using.
		Added Basic Hazmat Life Support online course to the curriculum
		Updated simulation, clinical, and airway requirements based on updated CoAEMSP SSR Appendix G
		requirements.
	7/11/17	Replaced Dr. Merk with Dr. Carter for meedical director. Added clear instructions in multiple locations that
		the capstone course cannot be started until all other courses are successfully completed. Details of
		summative evaluation at the end of field internship and details of affective domain evaluation throughout the
		program were more completely detaileed. Removed references to CoAEMSP LOR and CAAHEP pending
		accreditation. Added section to clearly indicate the only experiential learning accepted is military and A&P.
		Changed textbooks from Pearson to Jones and Bartlett (AAOS).
Section 7.120 - MO	4/18/17	Added new training entity certificate
BEMS documents	ļ	
Section 7.700 - Index	4/25/17	Removed Glossary of Abbreviations and significantly updated Index to include these abbreviations.

Sub-Section 4.480.06 - Changes from Version 5 to Version 6 (Froebel)

Version Six is named in dedication to Friedrich Froebel who was a German child educator who lived in the 1800's who laid the foundation for modern education based on the recognition that children have unique needs and capabilities. He created the concept of "kindergarten" and coined the term. Froebel also developed educational toys similar to building blocks and puzzles.

Section	Date	Description	
Section 1.725 - Faculty, Clinical			
Education Specialists			
Section 1.750 - Faculty, Guest	8/28/17	Updated Morgan Young CV.	
Instructors		Addecd Bobby OKeefe and Goldie Masters CV.	
		Added Lyman Taylor, Timothy Shaw, Melisa Painter CV.	
		Added Steven Keller, Cheryl Andrew CV.	
		Added John Smith, Paul DAgostino, Dawn Sloan, Brice Flynn CV.	
		Added Michael Minter CV.	
	10/23/17	Added Richard Kowal CV.	
		Added Michael Krteck CV.	
Section 1.900 EMS Education	1/7/18	Changed meeting frequency from bi-annually to once per semester.	
Advisory Board	1,,,10	changes meeting nequency from or announcy to ones per semisore.	
Section 4.160 - Course Fees	7/20/17	Added minimum and maximum class sizes and added First Aid class.	
	9/1/17	Updated course fees.	
	10/14/17	Updated course fees with NAEMT tactical courses and aligned AHA fees with CMH Ed Services.	
		Added provision for Cox employees to attend NAEMT courses at the same cost as CMH employees.	
		Added EVOS and TIMS. Lowered costs for refresher classes to be competitive.	
		Added Ellett employees to CMH and Cox for discounts. Reduced paramedic refresher costs.	
Section 4.240 - Refund Policy		Added section for VA students to meet requirements for VA refund.	
Section 5.700 - Training Roster		Updated roster form to include agency and make it cleaner to read.	
Form	10/20/17	e passes result to merado agency una mano ir vicanor le roud	
Section 6.030 - Generic	9/1/17	Removed EMT and Paramedic details and inserted references instead.	
Educational Calendar		Added which county's FTOs are responsible for which competencies.	
Section 6.060 - Clinical		Added draft clinical agreement from CoxHealth.	
Agreements	7720717	Trade division agreement from comments.	
Section 6.120 - Emergency	7/20/17	Updated class schedule to reflect J&B.	
Medical Responder Program		Added BLS CPR to the curriculum.	
[EMR Academy]	11/20/17	A LANGUA DE DE CENTRO LILO COMPANIA	
Section 6.360 - Emergency	7/21/17	Updated courses, timelines, and chapters according to J&B Curriculum.	
Medical Technician Program	8/28/17	Added section 6.360.34 to indicate credit for experiential learning will not be given for EMT	
[EMT Academy]		Academy.	
	9/1/17	Updated prerequisites for clinical sites based on new curriculum.	
	11/28/17	Updated course schedule based on suggestions from current academy.	
	1/7/18	Removed attendance requirement and removed minimum FISDAP score. Added 70% completion	
		rate to graduation requirements.	
	1/11/18	Changed course numbers to EMS 100 and EMS 102 to align with BTC courses.	
Section 6.600 - Paramedic	9/1/17	Updated courses and clinical prerequisites based on new curriculum.	
Program (Paramedic Academy)			
	9/3/17	Added section for advanced placement for RNs.	
	11/28/17	Added CoAEMSP Letter of Review into accreditation status. Added GEMS and PTEP courses to	
		certifications gained after completion. Added PTEP to CEP 1511.	
	1/7/18	Added details and grading rubric to applied research projects. Removed attendance requirement and	
		minimum FISDAP unit exam scores. Added 70% completion requirement to graduation	
		requirements. Changed class times to 9am to 5pm on all days that do not include A&P.	
	1/11/18	Added 2018 dates to all course scheduled. Changed course numbers to EMS ??? to align with BTC	
		courses.	

Sub-Section 4.480.07 - Changes from Version 6 to Version 7 (Galilee)

Version Seven is named in dedication to Galileo Galilei who was an Italian renaissance man who lived in the 1500's and is the central figure in the transition from natural philosophy to modern science.

Section	Date	Description
Section 1.900 EMS	5/15/18	Updated board member due to personnel change with CMH Chief Nursing Officer.
Education Advisory Board		
Section 3.330 - Student	4/25/18	Fixed typos on the paramedic student clinical evaluation cards.
evaluations		
Section 5.700 - Training	1/19/18	Updated roster form to facilitate new student billing process.
Roster Form		
Section 4.160 - Course Fees	3/16/18	Updated course fees so EMR is just the cost of the textbook.
		Added info on where application fees and tuition fees are sent and billed.
Section 6.360 - Emergency	5/15/18	Added skill requirements similar to they way they are listed for Paramedic Academy. Added NAEMT
Medical Technician		EMS Safety course. Upgraded NAEMT EVOS course to two-day. Removed 9-1-1 clinical requirements.
Program [EMT Academy]		Updated BEMS skills verification form (removed mouth-to-mask and added supraglottic).
Section 6.600 - Paramedic		Added generic chapter schedule. Added guest instructors to the course schedules.
Program (Paramedic	3/27/18	Several typo fixes and minor adjustsments based on 2018 Paramedic Academy. Generic classroom
Academy)		schedule modified. Added requirement for students to complete ePCR after each simulation scenario.
		Added scheduling and contact details for clinical sites. Added guest instructors.
	4/1/18	Added blank pharmacology quiz form.
	4/25/18	Added details of semester final practical exams. Corrected typos in applied research project instructions.
		Added info on how to sign up and where to go for EMS 103 clinicals.
	5/15/18	Added supplemental textbook information. Modified simulation requirements to include practice in class
		of observing scenarios. Added information on deadlines for each clinical course that is due by the end of
		the following semester. Added a few Mercy department administrative contacts. Added clinical site
		details. Added TECC to trauma course.

Sub-Section 4.480.08 - Changes from Version 7 to Version 8 (Khan)

Version Eight is named in dedication to Sir Syed Ahmad Khan who was an Indian philosopher of the nineteenth century British India who promoted Western-style scientific education and founded modern schools and universities in South Asia.

Section	Date	Description
Section 1.675 - Faculty,	6/9/18	Updated lead EMT instructors.
EMT Academy Lead		
Instructor		
	9/10/18	Moved all curriculum vitae and licenses/certifications copies to another document.
Director		
	9/10/18	Moved all curriculum vitae and licenses/certifications copies to another document.
Program Director		
	9/10/18	Moved all curriculum vitae and licenses/certifications copies to another document.
EMT Academy Lead		
Instructor		
	9/10/18	Moved all curriculum vitae and licenses/certifications copies to another document.
Paramedic Academy		
Lead Instructor		
	9/10/18	Moved all curriculum vitae and licenses/certifications copies to another document.
Guest Instructors		
Section 1.900 EMS	9/10/18	Removed Kellie Burns and Cody Liccardi. Added AJ Sherrer, Dawn Sloan, Katie McGee, and James Clarke.
Education Advisory		
Board		
Section 4.100 - Fair	9/10/18	Created this section from CAAHEP standards.
Practices		
Section 6.060 - Clinical		Added CoxHealth signatures.
Agreements		Added Mercy Hospital agreement.
Section 6.360 -	6/9/18	Updated schedule for 2018 EMT Academies
Emergency Medical	8/22/18	Updated schedule for moving EMT chapter quizzes to the class period after lecture. Modified clinical hours to
Technician Program		be 24 ER and 48 ambulance. Also added the first draft of the Rick Seiner Scholarship Program.
[EMT Academy]	9/10/18	Added guide on how to succeed on FISDAP exams. Updated EMS 100 course schedule. Changed EMS 102
		hours to more heavily weight ambulance time. Changed terminology for curriculm to National EMS Education
		Standards.
Section 6.600 -	7/2/18	Updated schedule for current paramedic academy
Paramedic Program	8/22/18	Added first draft of the Chris Loderhose Work Study Program.
(Paramedic Academy)	9/10/18	Added guide on how to succeed on FISDAP exams. Changed terminology for curriculm to National EMS
		Education Standards. Clarified military advanced placement entries added to skills tracker. Added comment
		that if entrance exam A&P section was not passing score, student must take A&P courses. Added comment to
		require drug screen before clinicals. Updated course schedules to match current plans. Added comment to
		anesthesia clinicals that student must inform and ask permission from patient. Added Cox ambulance clinical
		info. Added BTC transcript request form.

Sub-Section 4.480.09 - Changes from Version 8 to Version 9 (Locke)

Version Nine is named in dedication to John Locke who was an English philosopher and physician widely regarded as one of the most influential of enlightenment thinkers and commonly known as the "Father of Liberalism." Locke postulated late in the 1600s the philosophy of empiricism, which is a concept that we are born without innate ideas, and that knowledge is determined only by experience derived from sense perception.

Section	Date	Description
Section 1.400 -	1/15/19	Updated org chart.
Organizational Chart		
Section 1.900 EMS	1/15/19	Updated members to include recent graduates and changes to personnel positions.
Education Advisory		
Board		
Section 3.330 - Student	11/16/18	Moved all the clinical evaluation cards out of this section and into the relevant program areas.
evaluations		
Section 4.480 - Student	1/15/19	Fixed typo.
Dismissal		
Section 6.060 - Clinical	1/15/19	Moved this entire section to separate documents found on the CMH file server.
Agreements		
Section 6.090 -	1/15/19	Moved this entire section to separate documents found on the CMH file server.
Articulation Agreements		
Section 6.360 -	1/15/19	Added comment to clinical requirements that the student must maintain passing status to attend clinical
Emergency Medical		rotations. Added specification of AHA version of BLS CPR is required before clinicals. Added comment
Technician Program		that live patient contacts in FISDAP must include medical record number.
[EMT Academy]		
Section 6.600 - Paramedic	10/1/18	Made changes to EMS 222 and EMS 224 schedule to represent 2018 course details.
Program (Paramedic	11/14/18	Added field internship mentor approval form.
Academy)	12/20/18	Added ALS patient contact form link to 4th semester evaluation card for preceptors.
	1/7/18	Updated classroom details moving from Tue / Thu class setup to Mon / Thu setup. Updated daily written
		quiz and simulation evaluation forms. Added comment that the student must maintain passing status to
		attend clinical rotations. Added comment that live patient contacts in FISDAP must include medical record
		number. Moved Ch 16 (Respiratory Emergencies) from EMS 105 to EMS 101 to get that material covered
		before the FISDAP Airway Exam.
	1/15/19	Added comment to clinical requirements that the student must maintain passing status to attend clinical
		rotations. Updated faculty list to include a different A&P instructor, however, the details are not complete.
		Updated to the 10th edition of the A&P textbook. Added specification of the AHA version of BLS CPR is
		a prerequisite for the paramedic academy. Added TECC to the list of certifications gained in the paramedic
		academy. Updated EMS 101 schedule to represent 2019 course details. Changed all CMH hospital
		scheduling contact information to Lani Hayes, except Cardiology which is Robert Richardson. Added
		prerequisite for ER clinicals to have completed Anesthesia clinical time and all live human intubations.
		Changed scheduling contact for CMH Ambulance to Ryan McDonald. Removed CMH Dallas County
		Walk-In Clinic and CMH Pediatric Walk-In Clinic as sites after refusal to take students by those two
G .: 7.120 MO	1/15/10	clinics.
Section 7.120 - MO	1/15/19	Removed all of the BEMS annual reports as those documents are also kept elsewhere.
BEMS documents		

Sub-Section 4.480.10 - Changes from Version 9 to Version 10 (Mann)

Version Ten is named in dedication to Horace Mann who was an American educational reformer in the 1800s. Mann argued that universal public education was the best way to turn unruly American children into disciplined, judicious citizens. He established a public education system and a program for normal schools to train professional teachers in Massachusetts that were adopted by most states afterward.

Section	Date	Description
Section 1.900 EMS		Added new ER director.
Education Advisory	5/14/19	Removed Cody Liccardi at his request. Added new Interim Bolivar Fire Chief.
Board		· · ·
Section 3.330 - Student	5/14/19	Added discussion on how item analysis is done and criteria for removing poor questions. Also added
evaluations		comment that all tests have a comprehensive component.
Section 4.160 - Course	4/11/19	Updated the new name for the Safety Seminar.
Fees		
Section 4.640 -	5/14/19	Typo corrected.
Academic Criteria:		
Grading and		
Examination Policies		
Section 6.120 -	5/14/19	Added contact information to clinical evaluation card in case of student exposure.
Emergency Medical		
Responder Program		
[EMR Academy]		
Section 6.240 -	5/14/19	Added contact information to clinical evaluation card in case of student exposure.
Emergency Medical		
Dispatch Program [EMD		
Academy]	5/14/10	
Section 6.360 -	5/14/19	Added contact information to clinical evaluation card in case of student exposure. Added program
Emergency Medical		administration manual familiarization test to the third week of class.
Technician Program [EMT Academy]		
Section 6.600 -	1/10/10	Modified the definition of an ALS patient for team leads. Previously, starting an IV did not make a patient
Paramedic Program	1/10/19	ALS. Due to difficulty in getting ALS team lead contacts by the first student to do team leads in the busiest
(Paramedic Academy)		service area available, this change was made to give a more realistic target for students.
(I aramedic Academy)	1/26/19	Added photo and bio info from Lucinda Schmidt. Updated BTC A&P I syllabus
		Modified second semester schedule to reflect actual dates and topics for 2019. Removed requirements for two
	1/20/17	pediatric and two unconscious team leads in field internship phase.
	2/19/19	Modified first semester schedule to reflect actual dates and topics for 2019.
		Added course details and hours for each course, semester, and overall to the classroom details section.
	1/10/17	Removed references to number of hours listed on each class to eliminate confusion or multiple areas needing
		updates. Updated all four classroom course schedules to reflect actual dates for 2019. Added clinical
		scheduling details for Cox Air Care, TCAD, and WLAD.
	4/11/19	Pretty significant changes to the lab and clinical requirements to comply with CoAEMSP Appendix G.
	5/14/19	Typos corrected. Added clarification that each semester clinical requirements are due within six months of
		completing the semester and a total deadline of 12 month deadline after completing all classroom
		requirements. Also clarified there will be no extensions given past the 12 month deadline. Added adaptive
		mid-term and semester final exam descriptions to each semester schedule. Updated EMS 105 schedule to
		represent actual guest instructors and events. Modified ER clinical prerequisite from completing ALL
		intubations to just must complete ONE intubation and ONE anesthesia shift. Modified number of ALS team
		leads must be with mentor from first and last ten to first and last six. Added NREMT progression of lab-
		clinical-field. Added comments that skills must be completed in lab prior to the field. Also added requirement
		that field documentation must include medical record number to count and if there is a falsification, removal
		from the program is an option. Added requirements that all ALS patient encounters must be documented and
		only successful team leads count and the last 18 of 20 must be successful. The first and last skill evaluation
		should be done by an instructor and if the final evaluation is unsuccessful the student and peer evaluators must
		repeat all evaluations. Definition of successful skill evaluation is 80% of the points. Added description of how
		simulations are validated. Added contact information to clinical evaluation card in case of student exposure.
		Added program administration manual familiarization test to the third week of class.

Sub-Section 4.480.11 - Changes from Version 10 to Version 11 (Nye)

Version Eleven is named in dedication to Bill Nye who was an American science educator, communicator, television presenter, and mechanical engineer.

This version represents a significant change in this document. A re-organization was done where the previous format was based on Missouri BEMS accreditation and the new format is based on Commission on Accreditation of Allied Health Education Programs accreditation.

Section Title	Old Number	New Number
Front Matter	0.000	0.000
Approval Signatures	0.330	0.190
Scope	0.500	0.380
Table of Contents	0.660	0.760
General Requirements	1.000	1.000
Training Needs Evaluation / Mission Statements	1.200	1.040
Organizational Chart	1.400	1.120
Training Budget	1.500	1.160
Medical Director	1.600	1.200
Faculty, General	1.625	1.240
Faculty, Program Director	1.650	1.280
Faculty, EMT Academy Lead Instructor	1.675	1.320
Faculty, Paramedic Academy Lead Instructor	1.700	1.360
Faculty, Clinical Education Specialists	1.725	1.400
Faculty, Guest Instructors	1.750	1.440
EMS Education Advisory Board	1.900	1.480
Physical Facilities	2.000	1.520
Classroom Descriptions	2.330	1.520
Available Equipment and Supplies	2.660	1.520
Program Evaluations	3.00	1.560
Student Evaluations	3.330	1.560
Instructor and Course Evaluations	3.660	1.560
Program Resource Survey Completed by Students	3.770	1.560
Program Resource Survey Completed by Program Personnel		1.560
Employer Survey	3.990	1.560
Policy Manual	4.00	2.000
Admission Criteria	4.080	2.040
Fair Practices	4.100	2.080
Non-Discrimination	4.120	2.120
Course Fees	4.160	2.160
Refund Policy	4.240	2.200
Student Withdrawal Policy	4.280	2.240
Attendance Policy	4.320	2.280
Dress Code	4.360	2.320
Class Cancellation Policy	4.400	2.360
Academic Integrity	4.440	2.400
Student Dismissal	4.480	2.440
Appeal and Grievance Procedure	4.560	2.480
Academic Criteria: Grading and Examination Policies	4.640	2.520
Remedial Education	4.680	2.560
Health and Safety Procedures	4.720	2.600
Drug and Substance Use and Abuse	4.800	2.640
Certification Requirements	4.880	2.680
Photo and Video Release	4.920	2.760
Authorization for Release of Information	4.940	2.800
Policy Manual Acknowledgment	4.960	2.840
Records and Reports	5.000	1.000
Satellite Programs	5.140	1.600
Use of BEMS Number	5.280	1.640
Course Records	5.420	1.680
Initial Course Records	5.490	1.720
Training Roster Form	5.700	1.760
Student Transcripts	5.770	1.680

Section Title	Old Number	New Number
Sample Certificate of Completion	5.840	1.800
Program Details	6.000	3.000
Generic Educational Calendar	6.030	2.720
Emergency Medical Responder Program	6.120	3.280
Emergency Medical Dispatch Program	6.240	3.210
Emergency Medical Technician Program	6.360	3.350
Advanced EMT Program	6.480	3.420
Paramedic Program	6.600	3.490
Continuing Education Program	6.720	3.070
Field Training Officer Training Program	6.840	3.700
Appendix	7.000	4.000
MO BEMS Documents	7.120	removed
References	7.420	4.240
Change Log	7.560	4.480
Index	7.700	4.720

Section	Date	Description
Entire document	7/17/19	Completed major revisions after attending Accreditcon.
		Replaced all instances of Clinical Education Officer with Field Training Officer.
	7/31/19	Changed all references to "semester" to "trimester" to more accurately describe the annual schedule.
	,	Changed medical director to Gustavo Nix.
	8/1/19	Changed medical director to Tony Cauchi.
Section 1.200 - Medical		Added Mr. Babb signature to appointment letter.
Director	0.20.27	
Part 3 - Policy Manuals /	7/17/19	Updated all program course numbers to reflect new courses and better coordination.
Syllabi		
Section 1.160 - Training Budget		Updated based on FY 19-20 budget.
Section 1.440 - Faculty,	7/17/19	Added guest instructor access to JBLearning information.
Guest Instructors		
Section 1.480 - EMS	7/17/19	Major updates to this section to make generic agenda meet CoAEMSP requirements and details for minutes.
Education Advisory		
Board		
Section 1.520 - Physical	7/17/19	Changed classroom description from Eldorado to Stockton to reflect new ambulance station.
Facilities		Updated website link for the library card catalog.
Section 1.560 - Program	7/17/19	Improved detailed descriptions of each type of written tests.
Evaluations		Added more details of when to review test items based on descrimination.
Section 1.760 - Training	7/17/19	Updated form to have a separate page for each student to gather more information.
Roster Form		
Section 2.080 - Fair	7/17/19	Updated all links to each section.
Practices		
Section 2.160 - Course	7/17/19	Updated course fees based on the FY18-19 expenses and number of classroom hours. All expenses divided
Fees		by all hours was between \$9 and \$10.
Section 2.320 - Dress	7/17/19	Updated shirt colors and ordering process for Galls.
Code		
Section 2.720 - Generic	7/17/19	Updated summer semester to include EMT Academy entrance exams and clinical student packet due dates.
Education Calendar		
Section 3.140 - Life	7/17/19	Added this section as a placeholder for future AHA training site.
Support Courses		
Section 3.350 - EMT	7/17/19	Added Barron's EMT Test Prep to the textbook list.
Academy		Updated class dates to reflect 2019 dates.
		Clarified deadlines for clinicals to be one semester after completion of the Academy.
		Added form to facilitate grade communication between instructors and program director.
		Updated terminal competency form.
		Added details of students that already have certificates such as BLS, NIMS, etc can have credit without
		repeating them.
		Added section that describes the grading calculations.
	7/18/19	Changed all documentation deadlines to 48 hours.
		Added section detailing when students can "double-dip" patient contacts during clinicals.
	7/31/19	Modified the tuition details to only have payments on the first day, mid-term, and final. Modified grade
		calculation to include mid-term and final scores. Also added requirement for Platinum Adaptive before final
		exam.
	8/1/19	Added photos and bios for EMT instructors.
	7/17/19	Removed additional goal that did not include the ability to measure it.

Section	Date	Description
Section 3.490 - Paramedic		Made significant changes to include one classroom and one clinical course each semester with one field
Academy		experience and one field internship course. Also made chapter re-arrangements to allow starting of clinicals
		as soon as possible. Switched to two-week module format that includes a mandatory clinical shift each
		module.
		Added textbooks that are available to students and not provided to keep.
		Added section to describe how non-accredited medic graduates can enter the program. Added section to
		describe how students can re-enteri the program after failing out. Added details of students that already have certificates such as ACLS, NIMS, NIHSS, etc can have credit without repeating them.
	,	Added section that describes the grading calculations.
		Added AMLS and NFA Q courses to the curriculum.
		Added details of when simulations can replace clinical patient contacts.
		Clarified deadlines for clinicals completions.
		Added the ability for BLS team leads after completion of minimum hours.
		Updated terminal competency form to include evaluations after team leads and added medical director
		meeting.
	7/18/19	Added note that JBLearning practice chapter quiz must be completed with a passing score before being
		allowed to sit for the lecture or classroom activities for that chapter.
		Changed all documentation deadlines to 48 hours.
		Added section detailing when students can "double-dip" patient contacts during clinicals.
		Modified grade calculation to include mid-term exam, final exam, and ARP. Added age range definitions to
		clinical skill requirement table. Added requirement to have Platinum Adaptive exam complete before
		starting field internship.
		Added Osceola Clinic site.
Section 3.560 - Critical	7/17/19	Added this section for eventual addition of this program.
Care Paramedic Academy	- // - // 0	
Section 3.630 -	7/17/19	Added this section for eventual addition of this program.
Community Paramedic		
Academy Section 3.700 - CMH	7/17/10	Significant changes to this section (used to be labeled the FTO program but included onboarding
EMS Employee		information). It is now exclusively for onboarding and designed around using Platinum Ed.
Onboarding Academy		Current CMH EMT students that graduate from CMH Paramedic Academy and complete Field Internship at
Onobarding Academy		CMH, they can skip the third rider component of onboarding.
Section 3.770 -		Added this section for eventual addition of this program.
Supervising Officer	,,,,,,,	- range and person for a comment of the brogamin
Academy	'	
Section 3.840 - Managing	7/17/19	Added this section for eventual addition of this program.
Officer Academy	'	
Section 3.910 - Executive	7/17/19	Added this section for eventual addition of this program.
Officer Academy		

Section 4.720 - Index

- (AAOS) American Academy of Orthopaedic Surgeons, 102, 111, 139, 243
 (AED) Automated External Defibrillator, 123, 164
 (AHA) American Heart Association, 58, 59, 117, 120, 121, 123, 125, 129, 132, 139, 140, 148, 161,
- 172, 173, 244, 247, 250 (AHDR) All Hazards Disaster Response, 68, 161,
- (ALOC) Altered Level of Consciousness, 169 (BiPAP) Bi-level Positive Airway Pressure, 130, 181,
- (BP) Blood Pressure, 113, 141
- (BSI) Body Substance Isolation, 83
- (BVM) Bag Valve Mask, 130
- (CAD) Coronary Artery Disease or Computer Aided Dispatch, 248
- (CES) Clinical Education Specialist, 83, 92, 240, 242, 244, 249
- (CEU) Continuing Education, 14, 29, 81, 93, 250
- (CHF) Congestive Heart Failure, 171
- (CPAP) Continuous Positive Airway Pressure, 130, 164, 169, 181, 205
- (CPR) Cardio-Pulmonary Resuscitation, 57, 103, 113, 123, 125, 126, 129, 140, 141, 158, 164, 165, 197, 207, 244, 247
- (CRNA) Certified Registered Nurse Anesthetist, 190 (CSR) Code of State Regulations, 149
- (CVA) Cerebro-Vascular Accident or Stroke, 207
- (DT4EMS) Defensive Tactics for Emergency Medical Services, 243
- (ECG) Electrocardiogram, 123, 139, 164, 169
- (ED) Emergency Department [see ER], 31
- (EKG) Electrocardiogram [see ECG], 113, 142, 156, 160, 172, 173, 174, 183, 184, 185, 186, 197, 198, 199, 200
- (EMA) Emergency Management Agency, 55
- (EMD) Emergency Medical Dispatch, 97, 98, 99, 220, 240, 248, 250
- (EMR) Emergency Medical Responder, 1, 13, 54, 58, 68, 75, 85, 101, 102, 103, 104, 105, 117, 130, 135, 148, 220, 240, 243, 244, 245, 248, 250
- (EMS) Emergency Medical Services, 1, 9, 10, 11, 12, 15, 16, 17, 18, 20, 21, 26, 27, 29, 31, 32, 36, 37, 38, 41, 42, 43, 44, 46, 47, 50, 51, 52, 53, 54, 55, 56, 57, 58, 61, 62, 65, 66, 67, 68, 72, 73, 74, 77, 78, 80, 81, 85, 90, 91, 92, 93, 97, 98, 101, 102, 103, 107, 109, 111, 112, 115, 117, 118, 120, 121, 122, 124, 125, 129, 132, 133, 135, 136, 137, 139, 141, 143, 144, 145, 146, 148, 149, 151, 152, 153, 154, 155, 157, 159, 161, 163, 166, 167, 168, 170,

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- 203, 204, 206, 207, 212, 213, 215, 217, 220, 221, 222, 223, 225, 226, 227, 228, 231, 233, 235, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249,
- (ePCR) Electronic Patient Care Report [see PCR], 50, 118, 162, 210, 245
- (ER) Emergency Room, 55, 124, 129, 172, 189, 192, 206, 225, 226, 241, 243, 246, 247, 248
- (ET) Endotracheal, 15, 150, 165, 181, 205
- (FISDAP) Field Internship Student Data Acquisition Project, 243, 244, 246, 247
- (FTO) Field Training Officer [see CES], 14, 18, 50, 51, 83, 87, 88, 89, 92, 209, 210, 217, 219, 228, 239, 240, 242, 244, 250, 251
- (GED) General Education Diploma, 65, 140
- (GEMS) Geriatric Education for Emergency Medical Services, 68, 161, 186, 244
- (GI) Gastrointestinal, 126, 184
- (HIPAA) Health Insurance Portability Accountability Act, 92, 112, 140
- (HR) Heart Rate, 65, 74, 112, 140, 240
- (ICU) Intensive Care Unit, 179, 225, 242
- (ISBN) International Standard Book Number, 102, 111, 139
- (L&D) Labor and Delivery, 138, 195, 242
- (MCI) Mass Casualty Incident, 199, 205
- (MD) Medical Doctor, 1, 32, 33, 72, 109, 112, 137, 141, 220, 222
- (MOI) Mechanism of Injury, 197
- (MS) Medical Surgery or Med-Surg Unit, 77
- (NAEMT) National Association of Emergency Medical Technicians, 30, 31, 61, 68, 117, 120, 125, 126, 127, 148, 161, 173, 184, 185, 186, 199, 200, 242, 244, 245
- (NFPA) National Fire Protection Association, 36, 41, 46, 52
- (NIEMT) National Institute for Emergency Medical Training, 200
- (NIHSS) National Institute of Health Stroke Screen, 117, 148, 184, 251
- (NIMS) National Incident Management System, 117, 120, 127, 140, 148, 161, 197, 199, 250, 251
- (NREMT) National Registry of Emergency Medical Technicians, 38, 43, 44, 48, 81, 85, 120, 123, 151, 152, 153, 161, 167, 210, 240, 242, 248
- (OB) Obstetrics, 15, 57, 127, 138, 165, 172, 194, 195, 203, 205
- (PHS) Pre-Hospital Services [see EMS], 17, 19, 21, 30, 33, 37, 41, 43, 44, 46, 48, 51, 78, 80, 166, 172, 203, 217, 239, 241

(PTEP) Psychological Trauma in Emergency Medical Service Patients, 68, 126, 161, 173, 244 (QR) Quick Response barcode, 242 (RN) Registered Nurse, 25, 66, 115, 148, 151, 172, (RSI) Rapid Sequence Intubation, 171, 207 (RT) Respiratory Therapy, 180, 242 (SME) Subject Matter Expert, 121 (SMR) Spinal Motion Restriction, 130 (STEMI) ST-Segment Elevated Myocardial Infarction, 181, 205, 207 (TIMS) Traffic Incident Management System, 68, 120, 244 (VA) Department of Veterans Affairs, 61, 69, 244 12-Lead [see ECG], 123, 130, 139, 164, 169, 171, 181, 205 Abdominal, 127, 169, 184, 198 Absence, 72, 78, 81, 242 Abuse, 78, 84, 92, 103, 225, 249 Academy, 11, 13, 14, 20, 21, 23, 24, 25, 26, 27, 54, 58, 60, 61, 66, 68, 70, 75, 81, 85, 87, 88, 89, 97, 98, 101, 102, 103, 104, 107, 108, 109, 111, 112, 114, 115, 117, 118, 119, 120, 121, 122, 125, 129, 131, 132, 133, 135, 136, 137, 138, 139, 140, 141, 143, 144,148, 149, 151, 152, 153, 154, 155, 157, 158, 159, 160, 161, 162, 166, 170, 177, 178, 189, 203, 212, 213, 215, 217, 222, 228, 231, 233, 235, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251 Accreditation, 1, 10, 16, 25, 30, 31, 36, 37, 54, 61, 66, 101, 107, 133, 135, 136, 148, 152, 221, 242, 243, 244, 249, 251 (CAAHEP) Commission on Accreditation of Allied Health Education Programs, 1, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 23, 24, 25, 27, 33, 39, 43, 44, 48, 61, 66, 135, 136, 243, 246 (CoAEMSP) Committee on Accreditation of Education Programs for the Emergency Medical Services Profession, 1, 10, 22, 24, 27, 30, 31, 61, 101, 107, 122, 133, 135, 136, 164, 166, 168, 242, 243, 244, 248, 250 Missouri (BEMS) Bureau of Emergency Medical Services, 61, 85, 93, 132, 149, 151, 239, 240, 241, 242, 243, 245, 247, 249, 250 Admission, 27, 65, 66, 117, 148, 240, 241, 249 Advanced Placement, 25, 66, 117, 148, 149, 150, 151, 152, 153, 243, 244, 246 Advisory Board, 10, 11, 12, 14, 15, 21, 22, 54, 55, 87, 88, 89, 242, 244, 245, 246, 247, 248, 249, 250 Air Care, 127, 171, 204, 248 Airway, 15, 57, 103, 125, 126, 129, 130, 150, 164, 165, 169, 170, 171, 181, 189, 205, 207, 243, 247 Ambulance, 50, 56, 57, 83, 98, 104, 107, 113, 116,

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