

**MIAMI DADE COLLEGE
MEDICAL CENTER CAMPUS
SCHOOL OF HEALTH TECHNOLOGIES**

Department of Emergency Medical Services

**COURSE OUTLINE
EMS 2664 - PARAMEDIC CLINIC I
EMERGENCY MEDICAL TECHNICIAN PARAMEDIC**

EMS 2664 - PARAMEDIC CLINIC I

COURSE DESCRIPTION:

Practicum providing the opportunity for each student to develop competency in clinical skills within the hospital/field setting. Stresses the integration of basic computer skills, application of a paramedic skills and techniques. Direct clinical experiences include emergency departments, medical examiner's office, and geriatric and mental health facilities. This course includes Modules 1-4 of the 1998 DOT National Standard Curriculum for Paramedic Programs.

COURSE OFFERING:

Shift Class:

Fall Semester:	Day: "B" Shifts	TIME: 8:00am – 4:00pm	ROOM: Clinic
Spr Semester:	Day: "C" Shifts	TIME: 8:00am – 4:00pm	ROOM: Clinic
Sum Semester:	Day: "A" Shifts	TIME: 8:00am – 4:00pm	ROOM: Clinic

Evening Class:

Mondays & Wednesdays or Tuesdays & Thursdays (Depending of Clinical Rotations)

TIME: 5:00pm – 9:00pm

ROOM: Clinic

PREREQUISITE COURSES: EMS 1119, EMS 1119L, EMS 1431, BSC 2085, BSC 2085L

CO-REQUISITE COURSES: EMS 2601, EMS 2601L

REQUIRED TEXTS:

Nancy Caroline's Emergency Care in the Streets cd included 6th ed; Jones and Bartlett

Nancy Caroline's Emergency Care in the Streets 6th ed workbook; Jones and Bartlett

RECOMMENDED:

Advanced Cardiac Life Support provider manual

Comprehensive Guide to Prehospital Skills, Butman, ET. al.

COURSE COORDINATOR: Robert Jorge, Director of Clinical Education

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COURSE EVALUATION:

Your final course grade will be based on the following criteria:

Attendance	= 25% total grade
Clinical Practice/Performance	= 25% total grade
Clinical & Field Data Reports	= 25% total grade
EMT/Paramedic Clinical Summary/ Paramedic Patient Care Report	<u>= 25% total grade</u>
	100%

COURSE GRADING SCALE:

A = 100 - 94	B = 93 - 87
C = 86 - 80	F = 79 – below

ATTENDANCE

You must attend all scheduled clinical rotations. Due to the number of students that must be scheduled in various clinical facilities and rotations, students must attend rotations as scheduled. **ABSOLUTELY NO CHANGES IN THE CLINICAL SCHEDULE WILL BE ALLOWED WITHOUT AUTHORIZATION.** You must be in proper uniform for every clinical rotation or your instructor will send you home. In the event a student misses a scheduled clinical rotation, the grade for the attendance portion of the final grade will be dropped **15 points** for each day missed. There are no make-up days for clinical rotations missed as a result of absences.

If the instructor for your clinical rotation is late, **DO NOT LEAVE THE CLINIC.** Contact the **Department Chairperson or Clinical Coordinator**; notify the charge nurse you will be in a specific area studying. You may only leave if given permission to do so by the college, **if you leave without permission you will be counted absent.**

CLINICAL PRACTICE/PERFORMANCE

Appropriate clinical practice/performance is expected during all clinical rotations. Areas such as clinical judgment, communication skills and affective behaviors are included in this area.

Students are expected to practice only those skills they have been taught in lab. All students shall only work within their scope of practice. Students are expected to be “pro-active learners”: they should take every opportunity to learn and they should always be participating in some aspect of patient care.

All students are expected to use good judgment (i.e. – common sense) while at all clinical sites. This includes their interactions with patients, staff and faculty. Any student who is – in the opinion of the instructor – dangerous to himself or others will be sent home. Students will function under the affective objectives outlined in the EMS policy and procedure manual. Simply stated, you should treat all faculty, staff, patients and fellow students with respect. “Treat everyone as you would like them to treat you.” The following table will be utilized to calculate this portion of the clinical grade.

POINTS DEDUCTED	INFRACTION
20	Fails to follow direction
15	Constant supervision required
25	Unprofessional or unsafe actions
2	Patient communication needs improvement
2	Inappropriate patient communication
10	Rejects constructive criticism
5	Failure to work cooperatively with team members
2	Fails to use time to provide patient care
10	Poor aseptic technique or fails to use BSI.

PARAMEDIC CLINICAL & FIELD DATA REPORTS

Students in the Paramedic Program at Miami Dade College are required to perform a number of clinical procedures, assessments related to patient care, and function as a Team Leader in the pre-hospital environment. This requirement is one component of the accreditation process used by the Committee on Accreditation of Educational Programs for Emergency Medical Services Professions (CoAEMSP). To ensure that the program is compliant with this requirement, students must enter procedures and assessment related to patient care that are observed and/or performed during clinical rotations on the **Paramedic Clinical & Field Data**

Report. Instructions are provided to each student on how to set up this excel file and enter clinical data as it is performed during the clinical rotations. **IT IS THE STUDENT'S RESPONSIBILITY TO MAINTAIN THIS FILE.** Each student will submit a hard copy of this report on the shaded dates indicated on the report. **If the report is not submitted on that day, a grade of zero (0) will be recorded for that report.**

Paramedic One

Report Due Dates

Group One
Group Two

06/13, 07/10, 08/03
06/07, 07/07, 07/31

EMT/PARAMEDIC CLINICAL SUMMARY/PARAMEDIC PATIENT CARE SHEETS

Students are expected to complete one **EMT/PARAMEDIC CLINICAL SUMMARY SHEET** for each clinical rotation. All documentation must be legible, accurate, thorough and complete. These sheets must be signed by the clinical instructor (excluding the psy and intubation rotation) at the end of that day's clinical rotation.

In addition to the EMT/PARAMEDIC CLINICAL SUMMARY, at each hospital Emergency Room rotation and on your rescue rotations you will be required to complete one **PARAMEDIC PATIENT CARE REPORT** sheet. You should obtain the needed information from your patient communication and from the patient's chart. All documentation must be legible, accurate, thorough and complete.

These reports (**EMT/PARAMEDIC CLINICAL SUMMARY SHEETS** and **PARAMEDIC PATIENT CARE REPORTS**) must be submitted on the next scheduled shift - lecture class. Reports will be reviewed for accuracy and content. If corrections are required, the report (s) will be returned to the student to make corrections and be completed correctly. The student must return the corrected report on the next scheduled shift – lecture class. In the event a report is not submitted on time and/or returned to the instructor late after corrections, **5 points/day will be deducted from the score on the report. Reports not submitted, including those as a result of an absence, will receive a grade of zero (0). THE MAXIMUM SCORE OBTAINABLE ON A RETURNED REPORTS IS A GRADE OF 80.**

ACCESS SERVICES

Students with documented disabilities should contact the campus ACCESS office in advance for information on appropriate policies and procedures for obtaining assistance. No retroactive accommodations can be provided. The ACCESS office is located in room # 1345-1 at 305 237-4048. Additional information is available at <http://www.mdc.edu/medical/studentservices/access>

CLINICAL ROTATIONS

During your clinical rotations in the Paramedic Program, you will be afforded the opportunity to observe and practice various skills required for successful completion of the Paramedic Program. Emphasis will be placed on the following during your rotations:

A. PSYCHOMOTOR SKILLS:

The student must demonstrate the ability to safely administer medications.

The student should safely, and while performing all steps of each procedure, properly administer medications at least 15 times to live patients.

The student must demonstrate the ability to safely perform endotracheal intubation.

The student should safely, and while performing all steps of each procedure, successfully intubate at least 5 live patients.

The student must demonstrate the ability to safely gain access in all age group patients.

The student should safely, and while performing all steps of each procedure, successfully access the venous circulation at least 25 times on live patients of various age groups.

The student must demonstrate the ability to effectively ventilate non- intubated patients of all age groups.

The student should effectively, and while performing all steps each procedure, ventilate at least 20 live patients of various age groups.

B. AGES

The student must demonstrate the ability to perform a comprehensive assessment on pediatric patients.

The student should perform a comprehensive patients assessment on at least 30 (including newborns, infants, toddlers, and school age) pediatric patients.

The student must demonstrate the ability to perform a compressive assessment on adult patients.

The student should perform a comprehensive patient assessment on at least 50 adult patients.

The student must demonstrate the ability to perform a comprehensive assessment on geriatric patients.

The student should perform a comprehensive patient assessment on at least 30 geriatric patients.

C. PATHOLOGIES

The student must demonstrate the ability to perform a comprehensive assessment on obstetric patients.

The student should perform a comprehensive patients assessment on at least 10 Obstetric patients.

The student must demonstrate the ability to ability to perform a comprehensive assessment on trauma patients.

The student should perform a comprehensive patient assessment on at least 40 Trauma patients.

The student must demonstrate the ability to comprehensive assessment on psychiatric patients.

The student should perform a comprehensive patient assessment on at least 20 Psychiatric patients.

D. COMPLAINTS

The student must demonstrate the ability to perform a comprehensive assessment, formulate and implement a treatment plan for patients with chest pain.

The student should perform a comprehensive patient assessment, formulate and Implement a treatment plan on at least 30 patients with chest pain.

The student must demonstrate the ability to comprehensive assessment, formulate and implement a treatment plan for patients with dyspnea/respiratory distress.

The student should perform a comprehensive patient assessment, formulate and implement a treatment plan on at least 20 adult patients with dyspnea/respiratory Distress.

The student should perform a comprehensive patients assessment, formulate and Implement a treatment plan on pediatric patients with dyspnea/respiratory distress.

The student should perform a comprehensive patients assessment, formulate and Implement a treatment plan on at least 8 pediatric patients (including infants, toddlers And school age) with dyspnea/respiratory distress.

The student must demonstrate the ability to comprehensive assessment, formulate and implement a treatment plan for patients with syncope.

The student should perform a comprehensive patient assessment, formulate and Implement a treatment plan on at least 10 patients with syncope.

The student must demonstrate the ability to comprehensive assessment, formulate and implement a treatment plan for patients with abdominal complaints.

The student should perform a comprehensive patient assessment, formulate and Implement a treatment plan on at least 20 patients with abdominal complaints (for example: abdominal pain, nausea/vomiting, GI bleeding, gynecological complaints, etc.)

The student must demonstrate the ability to comprehensive assessment, formulate and implement a treatment plan for patients with altered mental status.

The student should perform a comprehensive patient assessment, formulate and Implement a treatment plan on at least 20 patients with altered mental status.

E. TEAM LEADER SKILLS

The student must demonstrate the ability to serve as a team leader in variety of prehospital emergency situations.

The student should serve as the team leader for at 50 prehospital emergency responses.

SUGGESTIONS FOR SUCCESSFULLY COMPLETING THIS COURSE

- You instructors are here to help you succeed. Feel free to stop by their office (if they have one) or call. Keep the line of communication open.
- Most clinicals begins at 8:00am - exactly. You will be informed of any variation of this schedule. You should arrive at the clinical site about ten minutes before it begins. This will give you time to settle in and talk before the clinical begins. Please do not arrive late. If you arrive more than 30 minutes late you will be sent home and receive a zero (0) for that rotation.
- If you will be unavoidably late or absent, please call the instructor (as a courtesy) as soon as you know.
- Please ask questions, discuss and participate. Your time is valuable. It will not do you any good to come to clinic and hold up the walls.
- Look over the course outline and course schedule before each clinic. This will allow you to focus your time in the most valuable area.
- If you feel you are not doing as well as you wish to, please speak with your instructor. Your instructor can make arrangements to schedule a tutor to assist you.
- Treat everyone, as you would like him or her to treat you. This includes students, instructors, staff and administrators. Actually it should include everyone you meet. Common courtesy goes a long way...in class as well as in life.
- Realize that this outline of objectives should serve as a guide to the major topics the class will cover. It is by no means an exhaustive list of every point you need to know.
- **Enjoy the class!!!**

EMS 2664 - PARAMEDIC CLINIC I

MODULAR TABLE OF CONTENT

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MODULE 2.0	-	MEDICAL EXAMINER
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MODULE 4.0	-	AIRWAY MANAGEMENT/INTUBATION
MODULE 5.0	-	PEDIATRICS
MODULE 6.0	-	RESCUE OPERATIONS
MODULE 7.0	-	RESPIRATORY

MODULE 1.0 - PATIENT ASSESSMENT

GENERAL OBJECTIVE:

This module applies to all clinical rotations. The Specific Objectives of Modules 1 – 6 are in addition to those noted here. The student will have an understanding of appropriate assessment techniques to effectively evaluate a patient's condition.

SPECIFIC OBJECTIVES:

- 1.1 Describe and demonstrate the techniques and importance of a comprehensive health history, history taking, obtaining and developing a relevant medical history making pertinent observations, detailed physical exam and vital signs.
- 1.2 Recognize and discuss signs and symptoms of the disease process associated with the patient and verbally identify the difference between signs and symptoms.
- 1.3 Discuss the information obtained from the patient's multi-system assessment including information regarding all body systems.
- 1.4 Identify and discuss the therapeutic modalities utilized on the patient.
- 1.5 Identify and discuss the pharmacological intervention utilized on the patient.
- 1.6 Relate the physical assessment, pathophysiology, therapeutic modalities, pharmacological intervention and clinical data obtained on the patient to the patient's clinical situation.
- 1.7 Observe and practice the techniques of a focused assessment and treatment.
- 1.8 Define, describe, and demonstrate the techniques of auscultation, inspection, palpation, percussion, and auscultation.
- 1.9 Evaluate the importance of a general survey.
- 1.10 Describe and demonstrate techniques used to the examination of the various body systems
- 1.11 Describe and demonstrate the general guidelines of recording examination findings.
- 1.12 Recognize hazards/potential hazards and differentiate safe from unsafe scenes.
- 1.13 Discuss and demonstrate methods for assessing and evaluating the mental status of an adult, child, and infant patients.
- 1.14 State the areas of the body that are evaluated during the detailed physical exam.
- 1.15 Define and discuss mechanism of injury and nature of illness as related to the trauma and/or medical patient.
- 1.16 Differentiate between critical life-threatening, potentially life-threatening, and non life-threatening patient presentations.
- 1.17 Summarize the "six Rs" of putting it all together: *Read the patient, Read the scene, React, Reevaluate, Revise the management plan, and Review performance.*
- 1.18 Identify the importance of communications when providing EMS and identify the role of verbal, written, and electronic communications in the provision of EMS.
- 1.19 Identify the components of the local EMS communications system and describe their function and use.
- 1.20 Identify the general principles and confidentiality requirements regarding the importance of EMS documentation and the ways in which documents are used.

MODULE 2.0 - MEDICAL EXAMINER

GENERAL OBJECTIVE:

Upon completion of this module, the student will gain an understanding and be able to demonstrate knowledge of human anatomy, pathology of trauma and pathology of disease.

SPECIFIC OBJECTIVES:

- 2.1 Observe the basic topographic and internal anatomy.
- 2.2 With the assistance of your instructor, describe the physiological processes related to various anatomical structures.
- 2.3 Observe anatomical landmarks used for endotracheal intubation.
- 2.4 Identify the pathology of a specific disease the decedent had and give the cause of death.
- 2.5 Identify injuries resulting from trauma and explain how death occurred.
- 2.6 Observe and/or demonstrate a needle and/or surgical cricothyrotomy.
- 2.7 Observe and/or demonstrate pleural decompression.

MODULE 3.0 - EMERGENCY MANAGEMENT

GENERAL OBJECTIVE:

Upon completion of this module, the student will practice and become proficient in the proper assessment and treatment of various illnesses and injuries encountered in the field.

SPECIFIC OBJECTIVES:

- 3.1 Demonstrate patient assessment including the history, primary assessment and secondary survey.
- 3.2 Demonstrate correct CPR according to the most current American Heart Association's standards.
- 3.3 Demonstrate and/or observe the steps in airway management utilizing adjuncts including: BVM, OPA, NPA, ET Tube and suction.
- 3.4 Perform phlebotomy, peripheral IV insertion and selection of solutions and tubing.
- 3.5 Discuss and demonstrate the proper techniques for IM, SQ and ET medication administration.
- 3.6 Verbally identify and demonstrate the steps in trauma management differentiating between life threatening and non-life threatening situations.
- 3.7 Identify and discuss medical emergencies and their management.
- 3.8 Demonstrate and identify the indications for oxygen therapy and the operation and correct application of airway adjuncts.

MODULE 4.0 - AIRWAY MANAGEMENT/INTUBATION

GENERAL OBJECTIVE:

Upon completion of this module, the student will understand and demonstrate proficiency in airway management, specifically endotracheal intubation. All procedures will be performed in the operating room on anesthetized patients under the direct supervision of an anesthesiologist (or designee).

SPECIFIC OBJECTIVES:

- 4.1 Identify the anatomy of the upper and lower airways and describe their functions.
- 4.2 Discuss and demonstrate the steps for proper airway management, control and manual airway maneuvers.
- 4.3 Explain the differences between the adult and pediatric airway anatomy.
- 4.4 Perform BSI during basic airway management, advanced airway management, and ventilation.
- 4.5 Identify the respiratory structures visualized when intubating a patient.
- 4.6 Discuss the correct sequence of events and time intervals for an intubation attempt.
- 4.7 Intubate a patient using correct technique (if permitted by the anesthesiologist) within the allotted time frames or observe the physician perform an intubation.
- 4.8 Perform extubation.
- 4.9 Demonstrate airway maintenance, monitoring vital signs and IV infusion therapy in the anesthetized patient under the supervision of an anesthesiologist (or designee).
- 4.10 Define normal respiratory rates and tidal volumes for adult, child, and infant and list the factors that affect respiratory rate and depth.
- 4.11 Define and explain the implications of partial and/or complete airway obstruction with good and poor air exchange.
- 4.12 Demonstrate suctioning the upper airway by selecting a suction device, catheter, and technique.
- 4.13 Describe the indications, contraindications, advantages, disadvantages, complications, and demonstrate techniques for ventilating a patient using various adjuncts.
- 4.14 Define, identify, and describe a tracheostomy, stoma, tracheostomy tube, and a laryngectomy.
- 4.15 Describe the special considerations in airway management and ventilation for patients with facial injuries, pediatric patients.
- 4.16 Describe the indications, contraindications, advantages, disadvantages and complications for performing an open cricothyrotomy.
- 4.17 Deliver supplemental oxygen to a breathing patient using the various oxygen adjuncts.

MODULE 5.0 - PEDIATRICS

GENERAL OBJECTIVE:

Upon completion of this module, the student will familiarize himself/herself with the techniques and skills involved with the assessment and treatment of the ill or injured child.

SPECIFIC OBJECTIVES:

- 5.1 Demonstrate a physical assessment of a child including the primary assessment, secondary assessment, and then verbalize field treatment of the child.
- 5.2 Verbally identify and/or demonstrate the preparation and administration of SQ, IM, IV medications, phlebotomy, appropriate airway adjuncts and ventilation devices.
- 5.3 Verbally identify and demonstrate management techniques for children in different age groups.
- 5.4 Successfully complete patient evaluation sheet required for rotation.
- 5.5 Describe the techniques for successful assessment and treatment of infants and children.
- 5.6 Outline differences in adult and childhood anatomy and physiology.
- 5.7 Identify "normal" age group related vital signs and discuss and demonstrate the appropriate equipment utilized to obtain pediatric vital signs.
- 5.8 Demonstrate the appropriate approach for treating infants and children and intervention techniques with families of the acutely ill or injured infants and children.
- 5.9 Discuss and demonstrate appropriate endotracheal intubation and the complications of improper endotracheal intubation procedure in infants and children.
- 5.10 Define and demonstrate the approach for treating infants and children with respiratory distress, respiratory failure, and respiratory arrest.
- 5.11 Differentiate between upper airway obstruction and lower airway disease.
- 5.12 Describe and demonstrate the general approach to the treatment of children with respiratory distress, failure, or arrest from upper airway obstruction or lower airway disease.
- 5.13 Discuss the common causes of hypoperfusion in infants and children and evaluate the severity of hypoperfusion in this age group.
- 5.14 Discuss and demonstrate fluid management and shock treatment for infant and child trauma patients.
- 5.15 Identify the major classifications of pediatric cardiac rhythms and discuss the primary etiologies of cardiopulmonary arrest in infants and children.
- 5.16 Describe the primary etiologies of altered level of consciousness in infants and children.
- 5.17 Identify common lethal mechanisms of injury in infants and children.
- 5.18 Identify infant and child trauma patients who require spinal immobilization and demonstrate proper spinal immobilization in infant and child patients.
- 5.19 Demonstrate appropriate treatment for infants and children requiring advanced airway and breathing management.
- 5.20 Demonstrate the appropriate treatment for infants and children with head injuries, chest injuries, abdominal injuries, extremity injuries, and burns.
- 5.21 Demonstrate proper CPR in infants and children.

MODULE 6.0 – RESCUE OPERATIONS

GENERAL OBJECTIVE:

Upon completion of the module, the student will gain practical experience in related to the procedures, assessments and techniques used during rescue operations in the pre-hospital environment.

SPECIFIC OBJECTIVES:

- 6.1 Discuss the medical and non-medical equipment needed to respond to call and identify what is essential for completion of the call.
- 6.2 State information essential in order to responded to a call and discuss various situations that may affect the response.
- 6.3 Define and discuss the fundamental components of extrication, it's purpose, the role and protective equipment of the paramedic and the steps necessary to protect the patient.
- 6.4 Distinguish between simple and complex access and evaluate various methods of gaining access.
- 6.5 Explain the importance of pre-hospital ACLS intervention and the importance of urgent transport to a facility.
- 6.6 Discuss and demonstrate various communication techniques to develop a rapport with the patient to promote effective care.
- 6.7 Evaluate the need for medical direction in various emergencies encountered in the pre-hospital environment.
- 6.8 Discuss common mechanisms of injury/nature of illness.
- 6.9 Identify the total number of patients at the scene and the need for additional help or assistance.
- 6.10 Explain the need to determine scene safety, including the importance of BSI and the steps the paramedic takes for personal protection from airborne and bloodborne pathogens.
- 6.11 Evaluate scene safety prior to entry.
- 6.12 Describe the general provisions of state law relating to the operation of a rescue vehicle.
- 6.13 Explain and demonstrate procedures to ensure proper stocking and operation of the rescue vehicle.
- 6.14 Identify the components of the Patient Care Report.
- 6.15 Identify the equipment requirements for the various types of rescue calls encountered in the pre-hospital environment.

MODULE 7.0 - RESPIRATORY

GENERAL OBJECTIVE:

Upon completion of this module the student will have an understanding of the anatomy and physiology of the respiratory system and be familiar with the proper assessment and treatment of the patient with respiratory distress/disease.

SPECIFIC OBJECTIVES:

- 7.1 Perform a complete history and physical examination of a patient identifying the signs of a patient who is breathing normally and identifying the signs and symptoms of a patient with respiratory distress/disease.
- 7.2 Auscultate a patient's lungs and identify normal and abnormal breath sounds and discuss the pathophysiology and appropriate treatment for abnormal findings.
- 7.3 Administer medications via a nebulizer, assessing all vital signs before, during and after the treatment.
- 7.4 Administer oxygen using the appropriate delivery device and/or adjunct.
- 7.5 Perform tracheal suctioning while observing sterile technique.
- 7.6 Perform body substance isolation procedures during basic airway management, advanced airway management, and ventilation.
- 7.7 Perform Pulse oximetry.
- 7.8 List the concentration of gases that comprise atmospheric air and describe the measurement of oxygen and carbon dioxide in the blood and list factors that cause decreased oxygen concentrations in the blood and list the factors that increase and decrease carbon dioxide production in the blood.
- 7.9 Define gag reflex, atelectasis, and FiO_2 .
- 7.10 Define and differentiate between hypoxia and hypoxemia.
- 7.11 Describe the voluntary and involuntary regulation of respiration and the modified forms of respiration.
- 7.12 Define normal respiratory rates and tidal volumes for adult, child, and infant and list the factors that affect respiratory rate and depth.
- 7.13 Explain the risk of infection to EMS providers associated with ventilation.
- 7.14 Define and explain the implications of partial and/or complete airway obstruction with good and poor air exchange.
- 7.15 Identify types of suction equipment and the purpose and indications for suctioning the upper airway.

STUDENT CONFIRMATION

My signature below acknowledges receipt of a copy of the course content, objectives and requirements for EMS 2601, 2601L, and 2664 and affirms my agreement to abide by the objectives and requirements while enrolled in this course.

Name: _____ Student Number: _____