

Bergen Community College
Division of Health Professions
Paramedic Science

PAR 204 Paramedic Clinical Concepts II

Date of most recent syllabus revision: New Course

Course typically offered: Spring Semester

Syllabus last reviewed by: BCC General Education Committee _____ Date: _____

Ad Hoc Committee on Learning Assessment

Curriculum Committee _____ Date: _____

Basic Information About Course and Instructor

Semester and Year Spring 2015

Course and Section Number PAR 2XX-001

Meeting Times and Locations: Wednesday 8:30 – 4:30 Meadowlands Campus and at off-site clinical affiliates

Instructor: TBD

Office Location: TBD

Phone: TBD

Department Secretary: TBD

Office Hours: TBD

Email Address: TBD

Course Description

0 Lecture 0 lab 3 Clinical Total 3 credits

This course continues to introduce students to actual patient experiences in the hospital clinical environment. Students will demonstrate the concepts and understanding of paramedic clinical skills. Students will be introduced to higher acuity areas such as the Intensive Care Units, Emergency Departments and specialty care areas like Obstetrics, Neonatal and Pediatrics. Students are assigned to a preceptor who is responsible to observe and assess performance. Travel to off-site clinical affiliates is required.

Clinical [284.00].

Prerequisite[s]: PAR-102, PAR-102, PAR-103, PAR-104, PAR-200. Corequisite[s]: PAR-201, PAR-202, PAR-203.

Paramedic Program Core Competencies:

A. Ethics and EMS Structure

- A1. Exhibit a professional code of conduct with personal and professional integrity.
- A1. Provide compassionate care to all populations while respecting cultural differences.
- A3. Comply with all state and federal regulation/laws for an entry-level paramedic.

B. Patient Assessment and Skills

- B1. Utilize a systematic assessment to determine appropriate modalities for medical and trauma patients of all ages while prioritizing interventions needed to improve patient outcomes.
- B2. Demonstrate skill proficiency in all entry-level psychomotor skills, utilizing them when clinically appropriate and at the correct time to improve patient outcomes.
- B3. Function as a member of the paramedic team by using effective communication and proper behavior that promotes customer service and efficient care.

C. Safety and Personal Wellness

- C1. Correctly identifies potential hazards to promote a safe environment for self, co-workers, patients and bystanders.
- C2. Uses critical thinking skills to properly manage and diffuse stressful environments.
- C3. Identifies personal stress and utilizes stress management techniques to ensure physical and emotional health.

Student Learning Objectives:

As a result of meeting the requirements in this course, students will be able to:

Documentation and Charting

Integrate comprehensive knowledge of EMS systems, safety/well being of the paramedic, and medical/legal and ethical issues, which are intended to improve the health of EMS personnel, patients, and the community.

Burn Unit (12 Hours)

Act as part of the burn team participating in care for patients who require burn wound management.

Psychiatric Unit (8 Hours)

Act as part of the crisis team participating in care for patients who require assistance for behavioral emergencies and/or screenings.

In-Hospital Critical Care (48 Hours)

Act as part of the Intensive Care team participating in care for patients who require in-hospital patient management.

Labor & Delivery (24 Hours)

Act as part of the labor and delivery team participating in care for patients who are experiencing imminent birth.

Pediatrics (48 Hours)

Act as part of the pediatric team participating in care for patients who require pediatric patient management.

Emergency Room (144 Hours)

Act as part of the Emergency Department team participating in care for patients who require emergent patient management.

Instructional Resources

Available in the library and computer labs

Annals of Emergency Medicine

Journal of Emergency Medical Services (JEMS)

Journal of Accident and Emergency Medicine

New England Journal of Medicine

Pre-Hospital Emergency Care Journal

Means of Assessment

In accordance with accreditation standards, students will be provided ample feedback to allow them the ability to improve performance in cognitive, psychomotor and affective domains of learning. Assessment for this course will include feedback in the following areas written, psychomotor and behavior.

Quiz (2)	10%
Affective Behavior Assessment 1/assigned shift	20%
Clinical Evaluation Form 1/assigned shift	20%
Patient Cases/Medication Cards	20%
Final Written Exam	20%
Participation	10%

From the BCC Distance Learning Education Website:

Partially online course: A partially online (hybrid) course (indicated by a suffix of **HY** -- eg., WRT-101-005**HY**) is a class that meets part of the time in a traditional classroom setting and the rest of the class work is done online via the Internet. Typically, a partially online (hybrid) course replaces at least one meeting time per week with online course activities through Moodle. The online work is completed within the week before the next in-class meeting, but normally does not require a student to be at their computer at a specific time of the day.

It is the responsibility of the student to login to their online or hybrid course to continue weekly discussions and submit assignments at the best time of day or night for the student, giving these types of courses flexibility not available to a regular classroom course. You must be willing to come to campus (usually once a week) because face-to-face class time is required and an attendance policy will be enforced.

Moodle Structure:

The delivery platform for this course is a hybrid format utilizing a Moodle program. Students must fully participate in both online and on campus components of the course to successfully complete the course.

The Moodle structure will provide opportunities for discussion boards, email communication, class announcements, online patient cases, and completion of tests and quizzes.

Course Menu in Moodle:

- Online Syllabus
- Course Announcements
- Forums
- Assignments
- Email
- My grades

Recommended Practice

To effectively manage this course for successful completion, you should do the following:

- Read and follow the course syllabus by adhering to the assigned dates of completion
- Read the messages under “Course Announcements”
- Follow the course calendar in Moodle
- Timely complete and submit all assignments – late assignments will not be accepted!
- Use the email communication platform to communicate with other students and the instructor.
- Actively participate in class and in online discussions

Course Content

This course will offer students the ability to gain cognitive knowledge related to patient care principles. The majority of the class will require students to work individually. Occasional group assignments may be utilized. Students will obtain clinical skill knowledge and competency prior to entering a clinical rotation.

Special Features of the Course**Pass Rate:**

The Paramedic Department pass rate is an 80%. Students are required to obtain a final average of an 80% in each core curriculum course. At the end of the semester, any student not achieving an 80% will be unable to continue in the program.

Course Texts

Aelert, Barbara. *ECGs Made Easy*, 4th Edition. 2009, Mosby JEMS (ISBN 978-0323069243)

American Heart Association. *Advanced Cardiovascular Life Support*, April 2011, American Heart Association Incorporated (ISBN – 978-1-6166-9010-6)

American Heart Association. *Advanced Cardiovascular Life Support Handbook*, April 2011, American Heart Association Incorporated (ISBN – 978-1-6166-9000-7)

American College of Surgeons. *Advanced Trauma Life Support*, 9th Edition, October 2012.

Caroline, Nancy. *Emergency Care in the Streets*, 6th Edition, 2008, Jones and Bartlett Publishing, Sudbury, Mass (ISBN – 978-0-7637-6469-2)

Walls, Ron. Manual of Emergency Airway Management, 4th Edition, 2012, Lippincott, Williams and Wilkins. (ISBN 9781451144918)

Research, Writing and Examination Requirements

Students will be required to develop patient case studies that effectively depict a common medical emergency. Requirements will include appropriate description of signs, symptoms, patient presentation, pertinent medical history, medications and/or recent surgeries. Student will present their case to group.

In addition to the program pass rate, students are required to obtain a minimum grade of 77% on all final exams. Any student not obtaining a 77% on the final exam will be unable to continue in the program.

Grading Scale

A	93-100
B+	89-92
B	85-88
C+	82-84
C	80-81
F	Below 80
N	Incomplete (course requirements not fulfilled)

Academic Conduct

The paramedic program faculty adheres to the policy statement governing academic conduct as outlined in the Bergen Community College catalog.

- Faculty may not post exam grades publicly due to privacy laws.
- Scholastic dishonesty including but not limited to plagiarism, cheating, and collusion will not be tolerated. Any student who has demonstrated any of these behaviors will be disciplined according to the Policy and Procedure Manual of the program.

Attendance Policy

Bergen Community College's attendance policy states: "All students are expected to attend punctually every scheduled meeting of each course in which they are registered.

Attendance and lateness policies and sanctions are to be determined by the instructor of each course. These will be established in writing on the individual course outline."

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) requires that students meet a minimum number of didactic/lab, clinical and field internship hours. Therefore students are expected to attend all class sessions.

No make-up quizzes, tests or exams will be given. Any student who is absent for a quiz, test, or exam will receive a grade of "0".

Students will be allowed one excused absence per semester. An absence is considered excused when a student notifies the professor prior to the start of class that they will be absent. Any additional absences will negatively affect the student's grade. For each unexcused absence the final grade will reduce by 1 point. For each excused absence the final grade will reduce by 0.5 point.

Tardiness will not be tolerated. In accordance with New Jersey state regulation, an attendance sheet will be available at the beginning of the class. If a student is tardy 3 times it will be calculated as an unexcused absence.

Other College, School and/or Departmental Policy Statements

The Paramedic Program is accredited by two agencies, The Commission on Accreditation of Allied Health Education Programs (CAAHEP) and the New Jersey Department of Health and Human Service – Office of Emergency Medical Services.

The Paramedic Department Policy and Procedure Manual will be reviewed at orientation and revisited at the start of any core courses. The manual will address specific policies required by either the state or national accrediting bodies. The purpose of the manual is to clearly outline the role and responsibility of each stakeholder in the education process; the student, the patient, the faculty, the clinical affiliate and the college. Students and faculty are expected to adhere to the policies of the program.

Student and Faculty Services

Students will be encouraged to utilize the support services offered by BCC. During the School of Health Profession orientation, these services will be highlighted. The faculty of the Paramedic Program will encourage students to access these services.

In addition, the Paramedic Program is structured to ensure the needs of the paramedic student will be met. Each squad will be assigned an adjunct faculty mentor to help facilitate their interaction positively within the program. There will be open skill labs and simulation sessions available to allow students to access adjunct faculty for support with

any learning difficulties. Peer tutors will be utilized to facilitate further success in the program.

Americans with Disabilities Act

Students who require accommodations in accordance with Americans with Disabilities Act (ADA) can request these services from the Office of Specialized Services. To learn more about the services offered at Bergen Community College, visit them at www.bergen.edu/oss.

Course Outline and Calendar

Week	Topic	Assignment
1	Clinical Orientation Focused Charting and Documentation	<i>Clinical Handbook Emergency Care in the Streets Chapter 6</i>
2	Burn Rotation 12 Hours	<i>Clinical Handbook</i>
3	Crisis Intervention 8 hours	<i>Clinical Handbook</i>
4	Critical Care 24 hours	<i>Clinical Handbook</i>
5	Critical Care 12 hours Quiz #1	<i>Clinical Handbook</i>
6	Labor and Delivery 24 hours	<i>Clinical Handbook</i>
7	Critical Care 12 hours	<i>Clinical Handbook</i>
8	Pediatrics 24 hours	<i>Clinical Handbook</i>
9	Spring Break	
10	Pediatrics 24 hours Quiz #2	<i>Clinical Handbook</i>
11	Emergency Department 24 hours	<i>Clinical Handbook</i>
12	Emergency Department 24 hours	<i>Clinical Handbook</i>
13	Emergency Department 24 hours	<i>Clinical Handbook</i>
14	Emergency Department 24 hours	<i>Clinical Handbook</i>
15	Emergency Department 24 hours Final Exam	<i>Clinical Handbook</i>

Syllabus Subject to Change

Unit Objectives:

As a result of meeting the requirements in this course, students will be able to:

Documentation and Charting

1. Identify the general principles regarding the importance of EMS documentation and ways in which documents are used.
2. Identify and use medical terminology correctly.
3. Recite appropriate and accurate medical abbreviations and acronyms.
4. Record all pertinent administrative information.
5. Explain the role of documentation in agency reimbursement.
6. Analyze the documentation for accuracy and completeness, including spelling.
7. Identify and eliminate extraneous or nonprofessional information.
8. Describe the differences between subjective and objective elements of documentation.
9. Evaluate a finished document for errors and omissions.
10. Evaluate a finished document for proper use and spelling of abbreviations and acronyms.
11. Evaluate the confidential nature of an EMS report.
12. Describe the potential consequences of illegible, incomplete, or inaccurate documentation.
13. Describe the special considerations concerning patient refusal of transport.
14. Record pertinent information using a consistent narrative format
15. Explain how to properly record direct patient or bystander comments.
16. Describe the special considerations concerning mass casualty incident documentation
17. Apply the principles of documentation to computer charting, as access to this technology becomes available.
18. Identify and record the pertinent, reportable clinical data of each patient interaction
19. Note and record "pertinent negative" and "pertinent positive" clinical findings.
20. Correct errors and omissions, using proper procedures as defined under local protocol.

Burn Unit (12 Hours)

Objectives:

- Demonstrate proper classification of burns, and correct calculation of the percentage of BSA affected.
- Identify current guidelines for the pre-hospital treatment for burns.
- Define the Parkland Formula, and explain its application to the MICU setting.

Required Activities:

- Submit a minimum of 1 patient case study.
- Document a minimum of 2 patient assessments using the patient assessment form.
- Prepare a minimum of 5 medication cards. The medications should be non-MICU approved drugs encountered during the Burn ICU rotation; medication cards will

include: generic and trade names, mechanism of action, indications, contraindications, dosage range, route(s) of administration, desired effect, and potential adverse reactions.

Skill Expectations:

- Observe a minimum of 1 patient assessment for a new admission to the Burn ICU.
- Perform a minimum of 2 patient histories and physical assessments.
- Observe daily rounds in Burn ICU, if available.
- Participate in burn care as directed by Preceptor.

Psychiatric Unit (8 Hours)

Objectives:

- Identify common psychiatric emergencies, including typical signs & symptoms, and current treatment modalities.
- Demonstrate appropriate communication techniques for a patient experiencing a psychiatric emergency.

Required Activities:

- Submit a minimum of 1 patient case study.
- Prepare a minimum of 10 medication cards. The medications should be psychiatric medications encountered during the Psychiatric unit rotation; medication cards will include: generic and trade names, mechanism of action, indications, contraindications, dosage range, route(s) of administration, desired effect, and potential adverse reactions.

Skill Expectations:

- Observe a minimum of 5 crisis interviews and/or interventions.
- Participate for a minimum of one-hour in-group milieu activities.

In-Hospital Critical Care (48 Hours)

Objectives:

- Demonstrate a complete patient history and physical assessment.
- Identify common dysrhythmias and their appropriate treatment modalities.
- Demonstrate proper application and use of a transcutaneous pacemaker.
- Demonstrate correct technique for defibrillation and synchronized cardioversion.
- Demonstrate the appropriate cardiac arrest treatment modalities utilizing current ACLS guidelines.
- Demonstrate insertion of a nasogastric tube using proper technique, including confirmation of correct placement.
- Identify etiologies, clinical presentation and treatment modalities of the following: angina pectoris, acute myocardial infarction, congestive heart failure, ventricular

and aortic aneurysm, cardiogenic shock, myocardial trauma, acute hypertensive crisis, diabetic emergencies, poisonings and overdoses, hypovolemic shock, acute respiratory failure, chronic obstructive pulmonary diseases (COPD), asthma, pneumonia, head injury and coma, cerebral vascular accident, seizures, burns, infectious diseases, acute abdomen, renal failure, fractures, septic shock, neurogenic shock, pulmonary edema, pulmonary embolism and anaphylaxis.

Required Activities:

- Document all patient assessments completed on the patient assessment form.
- Prepare a minimum of 10 medication cards. The medications should be non-MICU approved drugs encountered during the critical care rotation; medication cards will include: generic and trade names, mechanism of action, indications, contraindications, dosage range, route(s) of administration, desired effect, and potential adverse reactions.
- Submit a minimum of 2 patient case studies. The case study must include: chief complaint, history of present illness, past medical history, medication, allergies, clinical presentation, treatment modalities, response to treatment, and patient outcome.
- Document all skills performed and medications administered on the patient record in accordance with hospital policy.
- Document all patient assessments completed, skills performed, and medications administered on the clinical log sheet and/or FISDAP.
- Collect an ECG rhythm strip for each patient within the treatment area with an abnormal ECG or dysrhythmia; document rhythm interpretation and treatment modality.

Skill Expectations:

- Observe daily rounds in ICU, if available.
- Perform a minimum 10 complete patient histories and physical assessments.
- Perform a minimum of 5 neurological assessments.
- Perform a minimum of 5 trauma assessments.
- Observe a minimum of 1 pacemaker insertion or care for a minimum of 1 patient with an external pacemaker.
- Perform a minimum of 1 transcutaneous pacemaker application. (May be completed in other clinical areas)
- Participate in a minimum of 5 cardiopulmonary resuscitations. (May be completed in other clinical areas)
- Perform at least 5 defibrillations or synchronized cardioversions. (May be completed in other clinical areas)

- Perform a minimum of 2 nasogastric tube insertions. (May be completed in other clinical areas)
- OPTIONAL: Review and demonstrate the utilization of a Doppler.

Labor & Delivery (24 Hours)

Objectives:

- Identify the normal stages of labor.
- Identify the etiologies, clinical presentations, and treatment modalities for common complications / abnormal delivery presentations.
- Demonstrate assessment of the newborn and post-partum mother.

Required Activities:

- Submit a minimum of 2 patient case studies.
- Prepare a minimum of 4 medication cards. The medications should be medications encountered during the L & D rotation; medication cards will include: generic and trade names, mechanism of action, indications, contraindications, dosage range, route(s) of administration, desired effect, and potential adverse reactions.
- Document patient assessments and skills performed on the patient record in accordance with hospital policy, and on the clinical log sheet and/or FISDAP.

Skill Expectations:

- Observe a minimum of 5 vaginal deliveries.
- Assist in the care of the newborn and the postpartum mother for a minimum of 5 deliveries.
- OPTIONAL: Observe a minimum of 2 C-Section deliveries.

Pediatrics (48 Hours)

Student must complete a minimum of one shift in two different levels of pediatric care. If available, at least one shift should be completed in the Pediatric ICU and one shift completed in the Neonatal ICU.

Objectives:

- Identify normal vital signs for each developmental milestone of childhood.
- Identify the correct administration and pediatric doses for all MICU approved medications.
- Demonstrate a pediatric patient assessment, using age-appropriate assessment techniques.
- Demonstrate the appropriate cardiac arrest and peri-arrest treatment modalities utilizing current PALS guidelines.

Required Activities:

- Submit a minimum of 3 pediatric case studies.

- Prepare a report on age-specific approaches to pediatric assessment and treatment.
- Prepare a minimum of 10 medication cards. The medications should be non-MICU approved medications encountered during the Pediatrics rotation; medication cards will include: generic and trade names, mechanism of action, indications, contraindications, dosage range, and route of administration, desired effect, and potential adverse reactions.
- Complete a patient assessment form for each pediatric assessment completed.
- Document all skills performed on the patient record in accordance with hospital policy.
- Document all assessments, skills performed, and medications administered on the clinical log sheet and/or FISDAP.

Skill Expectations:

- Observe daily rounds in Pediatric and/or Neonatal ICU, if available.
- Perform a minimum of 5 pediatric patient assessments; the patients selected should represent a variety of age groups / stages of development.

Emergency Room (144 Hours)

Objectives:

- Demonstrate a complete patient history and physical assessment.
- Identify common dysrhythmias and their appropriate treatment modalities.
- Demonstrate proper application and use of a transcutaneous pacemaker.
- Demonstrate correct technique for defibrillation and synchronized cardioversion.
- Demonstrate the appropriate cardiac arrest treatment modalities utilizing current ACLS guidelines.
- Demonstrate proper technique for the following skills: 12-lead ECG, venipuncture, IV insertion, medication administration, advanced airway insertion, defibrillation, synchronized cardioversion, and transcutaneous pacing.

Required Activities:

- Document all patient assessments completed on the patient assessment form.
- Prepare a minimum of 10 medication cards. The medications should be non-MICU approved drugs encountered during the ER rotation; medication cards will include: generic and trade names, mechanism of action, indications, contraindications, dosage range, route(s) of administration, desired effect, and potential adverse reactions.
- Submit a minimum of 4 patient case studies. The case study must include: chief complaint, history of present illness, past medical history, medication, allergies, clinical presentation, treatment modalities, response to treatment, and patient outcome.

- Document all skills performed and medications administered on the patient record in accordance with hospital policy.
- Document all patient assessments completed, skills performed, and medications administered on the clinical log sheet and/or Fisdap.
- Collect an ECG rhythm strip for each patient within the treatment area with an abnormal ECG or dysrhythmia; document rhythm interpretation and treatment modality.

Skill Expectations:

- Perform a minimum 20 complete patient histories and physical assessments.
 - Perform a minimum of 5 neurological assessments.
 - Perform a minimum of 5 trauma assessments.
 - Perform a minimum of 5 respiratory assessments.
 - Perform a minimum of 5 cardiac assessments.
- Perform a minimum of 30 intravenous infusions using proper aseptic technique.
- Prepare and administer a minimum of 10 intravenous medications, using proper equipment, dosing, and technique.
- Prepare and administer a minimum of 5 subcutaneous and/or intramuscular medications, using proper equipment, dosing, and technique.
- Perform a minimum of 1 transcutaneous pacemaker application. (May be completed in other clinical areas)
- Participate in a minimum of 5 cardiopulmonary resuscitations. (May be completed in other clinical areas)
- Perform at least 5 defibrillations or synchronized cardioversions. (May be completed in other clinical areas)
- Perform a minimum of 2 nasogastric tube insertions. (May be completed in other clinical areas)

The chart below is intended as a guide, and is not a substitute for review of the individual area's detailed learning objectives, required activities, and skill expectations. This chart reflects the minimum skill totals that should be achieved by completion of the Clinical Internship. Some skills may be completed in more than one clinical area.

The paramedic student is expected to achieve all Clinical Internship skill performance minimums prior to beginning the Field Internship. In the event that a skill performance minimum has not yet been achieved, the paramedic student may progress to the Field Internship only at the discretion of the Program Clinical Coordinator, Program Director and Program Medical Director. Skill minimums not achieved during the Clinical Internship must be completed through skill performance during the Field Internship.

Clinical Skill	Minimum Successful
Ventilation of the Unintubated Patient	10
Endotracheal Intubation	5
Supraglottic Airway Insertion	2
Venipuncture	20
IV Insertion	50
12-Lead ECG	10
Auscultate Breath Sounds	20
Endotracheal Suctioning	5
Medication Administration - Nebulized	10
Medication Administration - Intravenous	10
Medication Administration - Subcutaneous or Intramuscular	5
Patient History and Physical Assessment	30
Neurological Assessment	5
Trauma Assessment	5
Respiratory Assessment	5
Cardiac Assessment	5
Pediatric Assessment	5
Transcutaneous Pacemaker	1
Defibrillation / Synchronized Cardioversion	5
Cardiopulmonary Resuscitation	5
Nasogastric Tube Insertion	2
CPAP	5
Neonatal Assessment and Post-Partum Care	5
Observation of Vaginal Deliveries	5