# Student Handbook and Catalog

July 2024



The Axon Education Mantra "PRIMUM RESPECTUM DATE" or "FIRST GIVE RESPECT

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### About Axon Education and The Axon Education Consortium

### **Background of Axon Education**

Axon Administration LLC was formed on July 31st, 2015, to research and identify opportunities for allied healthcare education, specifically in Emergency Medical Services education. The institution was created as an educational pathway to take someone through EMT-Basic and, ultimately, EMT-Paramedic certifications.

Axon Education, LLC's Texas EMS School equips students for meaningful careers through effective, student-centered, and efficient distance education. Axon Education, LLC is the host-member of the Axon Education Consortium.

Axon Education's curriculum is approved by the Texas Department of State Health Services for the delivery of EMR, EMT, Advanced EMT, and continuing education through Axon Education while the Paramedic curriculum is approved for delivery through the Axon Education Consortium. The Axon Education Consortium Paramedic program has been issued a Letter of Review by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP). This letter is NOT a CAAHEP accreditation status; it is a status 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. A Letter of Review is recognized by the National Registry of Emergency Medical Technicians (NREMT) for eligibility to take the NREMT's Paramedic credentialing examination(s). However, it is NOT a guarantee of eventual accreditation.

### The Axon Education Consortium Program Goal

To prepare Emergency Medical Services personnel who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

### The Axon Education Mission Statement

The institution's mission is to equip students for meaningful careers through effective, studentcentered, and efficient distance education.

#### A philosophy of effectiveness

Many of Axon Education's programs are competency-based, meaning that time on task is not as important as successfully completing a task and demonstrating an understanding of a concept. Formative assessment is valued to help students self-correct and be motivated to grow.





### A philosophy of efficiency

Axon Education programs begin with student assessment, which allows for personalization of the educational experience. These learning methods provide personalized coaching and tailor the learning experience to the individual. This approach prioritizes efficient, hands-on learning experiences over just reading texts, ensuring a more engaging and effective education.

### A philosophy of student-centered education

Axon Education believes that it is possible to create a rigorous learning environment and a challenging curriculum in an environment that encourages student satisfaction. This student-centered approach is built upon frequent assessment, which helps students understand what is expected of them, coaching, and a high degree of responsiveness from student support personnel.

### **The Axon Education Vision Statement**

Axon Education will be recognized as a leader in delivering personalized learning experiences with high student satisfaction.

### The Axon Education Mantra

"PRIMUM RESPECTUM DATE" or "FIRST GIVE RESPECT"

### **Administration and Legal Control**

#### **Axon Education – Administration**

#### KB Massingill, Ph.D.

Title: President and CEO Degrees: Ph.D. in Information Sciences, Master of Science in Education Specialized Training: School Administration Areas of Instruction: Administration

#### Judd Smith, BAS, MBA, LP

Title: Executive Vice-President/Program Director Degrees: Bachelor of Arts and Sciences, Master of Business Administration Specialized Training: EMT-P Instructor Areas of Instruction: Paramedicine, EMS Management





#### Colten J. Philpott, MD [MPH, MBA, MHA, MPA]

Title: Medical Director

Degrees: Medical Doctorate, Master of Public Health, Master of Business Administration, Master of Healthcare Administration, Master of Public Administration Specialized Training: Board Certified, American Board of Emergency Medicine Areas of Instruction: Emergency Medicine, Legal Aspects of Paramedicine, Leadership Development Organizations: Texas College of Emergency Physicians Resident/Candidate Board Member, Texas College of Emergency Physicians Leadership and Advocacy Fellow, Emergency Medicine Residents Association, American College of Emergency Physicians

#### Brandon Lemley, BS, MBA

Title: Vice-President of Operations Degrees: Bachelor of Science, Master of Business Administration Specialized Training: Enrollment Management, Marketing, Student Support Areas of Instruction: Administration

#### Nicole Vinson, BA, MED

Title: Vice-President of Institutional Effectiveness Degrees: Bachelor of Arts in Education, Master of Education Specialized Training: Institutional Effectiveness Areas of Instruction: Administration

#### Cynde Wadley, BS, MED, Ed.D.

Title: Dean of Instruction and Academic Support Degrees: Bachelor of Science in Education, Master of Education in Instructional Technology, Doctorate in Educational Leadership Specialized Training: Distance Learning, Curriculum Development, Academic Administration Areas of Instruction: Administration

#### Leah Leas, BS, MED

Title: Director of Administrative Services Degrees: Bachelor of Science in Education, Master of Education Specialized Training: Student Finances, Registration Services, Administrative Planinng

#### Axon Education – Legal

Axon Administration LLC, dba Axon Education Consortium, dba Axon Education, a Board of Managers govern dba Texas EMS School.

#### Board of Managers

- KB Massingill, Ph.D., President and Secretary
- Josh Ensor, Chairperson
- Scott Wofford, D.C., governing officer



### **Axon Education Consortium – Advisory Committee**

Axon Education Consortium is advised by a committee with members each representing a particular "Community of Interest."

**KB Massingill, Ph.D. (Chairperson)** President – Axon Education COI - Sponsor Administration

**Colten J. Philpott, MD** Texas Midwestern Emergency Physicians, Abilene, TX COI – Physician - Medical Director

Judd Smith, LP (ex officio) Executive Vice-President Program Director – Axon Education COI – Sponsor Faculty

**Carl Nix** Assistant Fire Chief – City of Melissa, Texas Fire Department COI – Fire Departments

Melissa Strawbridge, EMT EMS Director Haskell County COI – Employers

Michelle Stevens CEO – Haskell Memorial Hospital COI – Hospitals

Kenny Thompson County Judge – Haskell County, Texas COI – Government Official

**Randy Young** Compliance Administrator – Team Financial Strategies COI – Public

Faith DeWees, EMT Paramedic Student

**Aaron Klause, LP** Graduate Representative



Adam Wester, LP Assistant Program Director – Axon Education Faculty Member

Melissa Berrie, EMT-P Faculty Member – Axon Education

Nader Awwad, DC, LP GMR Arlington

### **Axon Education Consortium – Faculty**

- Juddson Smith LP, BAS, MBA
- Adam Wester LP
- Melissa Berrie EMT-P
- Rick Fikes EMT-P
- Brittany Bangert EMTB, BA
- Nicole Bowker EMT-P
- Tim Kelley EMT-P
- KB Massingill EMT, PhD

### Accreditation, Licensing, and Recognition

#### DSHS

The Texas Department of State Health Services approves Axon Education to deliver Advanced EMT Programs. To contact Texas DSHS: PO Box 149347 Austin, TX 78714-9347 (512) 834-6765 https://www.dshs.texas.gov/emstraumasystems/contact.shtm

#### NREMT

Axon Education and Axon Education Consortium are registered with the National Registry of Emergency Medical Technicians to provide EMS Education.

#### CAAHEP

The Axon Education Consortium Paramedic program has been issued a Letter of Review by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP Executive Office). This letter is NOT a CAAHEP accreditation status; it is a





status 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. Letter of Review is recognized by the National Registry of Emergency Medical Technicians (NREMT) for eligibility to take the NREMT's Paramedic credentialing examination(s). However, it is NOT a guarantee of eventual accreditation. To contact the CoAEMSP Executive Office: 8301 Lakeview Parkway Suite 111-312 Rowlett, TX 75088 214-703-8445 FAX 214-703-8992 www.coaemsp.org

### **Hours of Operation**

Corporate offices are open Monday through Friday from 8:00 a.m. to 5:00 p.m. (CST). Students may submit a support ticket anytime, including weekends, holidays, and non-office hours. Support personnel attempt to address support tickets from 9:00 a.m. to 9:00 p.m. Monday through Friday but will often address tickets immediately during other times. Student schedules, including due dates, will vary according to their personalized learning plan and negotiated due dates for milestones and learning activities.

### Academic Calendar

It is important to recognize that the institution does not follow a traditional academic calendar. Instead, students should follow the timeline(s) prescribed in their syllabi, in addition to institutional policies, to ensure the successful completion of their program.

### Student Holidays [02.08.002]

The Minimum Activity Policy will not be enforced during weeks that include student holidays. Student holiday weeks begin on Monday and end on Sunday at midnight. Student support will be limited during these weeks, and student support will not be available on the commonly identified holidays that fall during student break weeks. Students needing support should email support@axoneducation.com.

- New Year's Day: January 1st
- **Spring Break:** April (preceding Friday through the following Monday of the U.S. Easter celebration)





- Fall Break: November (Wednesday through Sunday of the U.S. Thanksgiving celebration)
- Christmas: December 25th

### **General Curriculum Information**

The mantra at Axon is the Latin phrase *"Primum Respectum Date"* which means "first give respect." This mantra serves as the cornerstone of the courses aiming to instill this fundamental lesson prominently at the forefront of the cognitive, behavioral, and affective learning experiences that the Axon Education team has designed. The structured educational program prepares students to be skilled and dedicated professionals capable of responding to emergencies with competence, confidence, and compassion. The goal is to ensure the availability of well-trained emergency health professionals who provide vital care when every second counts.

The institution ensures that all curricular materials promote effective distance education study by:

- Emphasizing engagement
- Emphatically communicating lofty expectations based on previous progress
- Consistently discussing affect
- Respecting diversity of learning and approach
- Providing prompt and thorough feedback through dialogue
- Emphasizing positive reinforcement
- Creating consequences that allow formative failure
- Encouraging reporting of curriculum breakdown
- Facilitating the generalization of learning to new contexts
- Setting proximal (short-term) goals for students who are struggling
- Mixing performance goals and mastery goals
- Taking advantage of simulation opportunities
- Viewing the student holistically
- Creating opportunities for peer-to-peer teaching and learning

The institution designs its curriculum to address the unique needs of learners in the online learning environment while also recognizing the unique needs of EMT/Paramedic students to practice psychomotor and affective skills in skills labs and clinical settings.

#### **Competency-Based Learning for EMTs and Paramedics**

Competency-based learning is integral to ensuring that students acquire the necessary competencies to be effective EMTs or Paramedics. This educational approach focuses on





students demonstrating mastery of specific skills and knowledge areas before progressing, ensuring that educational outcomes align with industry standards and real-world requirements.

#### Key Components of Competency-Based Learning:

#### 1. Clear Competencies and Learning Outcomes:

Each course is designed with clear, measurable competencies that students must achieve. These competencies are aligned with the requirements for EMT and Paramedic certification, ensuring that students are acquiring the skills and knowledge necessary for their future careers.

#### 2. Flexible Learning Pathways:

Competency-based learning allows students to progress at their own pace. They can spend more time on challenging areas and move quickly through content they have already mastered. This flexibility is particularly beneficial for adult learners who may have varying levels of prior knowledge and experience.

#### 3. Assessment of Competencies:

Students are assessed using a variety of formative and summative assessments designed to measure their mastery of each competency. These assessments may include practical exams, simulations, virtual labs, and clinical evaluations. The goal is to ensure that students can apply their knowledge and skills in real-world scenarios.

#### 4. Personalized Feedback and Support:

Faculty provide timely, personalized feedback to help students understand their progress and areas needing improvement. The Student Support Team is available to assist students with any challenges they may encounter, ensuring they have the resources and guidance necessary to succeed.

#### 5. Continuous Improvement:

The Canvas Team meets weekly to discuss feedback from faculty and students, making modifications to courses as needed. This continuous improvement process ensures that the curriculum remains relevant and effective in preparing students for their roles as EMTs and Paramedics.

### **Curriculum Design for Effective Distance Education**

The online learning environment is designed to use asynchronous content delivery and student assessment. However, other instructional tools are used to facilitate student learning. Examples include peer-to-peer engagement, podcasts, videocasts, simulations, and guest lecturers. Interactive lectures and quizzes foster student engagement.

#### **Cognitive Instruction:**



Cognitive instruction is designed to use multiple learning channels to meet student needs, with formative assessments used to monitor student learning.

#### **Psychomotor Skills Instruction:**

A key component of the design of psychomotor skills instruction is the evaluations conducted through face-to-face interactions during Skills Labs as well as field and clinical internships. The psychomotor skills are supplemented with lab simulations on Canvas.

#### **Affective Learning:**

Affective learning is designed using team assignments, peer evaluations, and instructor feedback in the Skills Lab. The incorporation of affective skills is integral to the curriculum and the student's success in clinical and field experiences.

#### **Engaging Students in Active Learning**

Even in these situations, students will be engaged in active learning. Specifically, students will be asked to read and prepare for lectures, and faculty will be asked to evaluate students in advance regarding their preparedness and then intentionally modify lectures or presentations to address demonstrated weaknesses or special student needs. Group polling, anonymous questioning, and other engagement-oriented tools are built into the video conference/webinar tools that will be used so that, in many ways, the experience exceeds the opportunities of a simple face-to-face lecture.

#### **Portfolio Assessment**

Portfolio assessment will be a significant component of evaluating the performance of cognitive, affective, and psychomotor learning. Portfolio development places the responsibility for learning on the student's shoulders. To successfully develop a learning portfolio, students must understand in advance what they are expected to know and how that learning is to be demonstrated or documented. The NREMT has recognized this as a valid learning approach for specific psychomotor skills in various programs. Still, the value of the approach extends beyond psychomotor skill documentation into learning and assessment in every learning domain and at every level.

#### **Proctored High-Stakes Testing**

Proctored high-stakes testing will be used in multiple circumstances. In a competency-based curriculum, assessment emphasizes longitudinal demonstration of skills and competencies rather than focusing on time-on-task or high-stakes demonstration of competency through end-of-unit or final exams. The institution's course will use longitudinal assessment for both formative and evaluative purposes, but proctored high-stakes testing will be an integrated part of the curriculum. Longitudinal assessments are necessary because, in order for the student to





enter the EMS profession for which they are studying, the student must pass specific government-mandated or National Registry-prescribed exams. To prepare the student for this experience, the student will be exposed several times to testing in environments similar to those used by the National Registry or governmentally mandated tests.

#### **FISDAP System and Evaluative Testing**

The FISDAP system and others will be used to provide evaluative testing to students at various stages in the curriculum. Additionally, the system will provide test preparation exercises, including taking tests under time constraints. These exercises are intended to be formative in nature and allow individual students to gauge their preparedness for the professional exams.

These comprehensive strategies and the emphasis on competency-based learning ensure that our EMT and Paramedic students are thoroughly prepared to meet the demands of their professions and excel in their careers.

### Standard Educational Terms

Axon Education defines some of the more standard educational terms as shown in the table below:

View of Knowledge	Knowledge is a repertoire of behavioral responses to environmental stimuli.	Knowledge systems of cognitive structures are actively constructed by learners based on pre-existing cognitive structures.	Knowledge is constructed within social contexts through interactions with a knowledge community.
View of Learning	Passive absorption of a predefined body of knowledge by the learner. Promoted by repetition and positive reinforcement.	Active assimilation and accommodation of new information to existing cognitive structures. Discovery by learners is emphasized.	Integration of students into a knowledge community. Collaborative assimilation and accommodation of new information.
View of Motivation	Extrinsic, involving positive and negative reinforcement.	Intrinsic learners set their own goals and motivate themselves to learn.	Intrinsic and extrinsic. Learning goals and motives are determined both by learners and extrinsic rewards provided by the knowledge community.
Implications for Teaching	Correct behavioral responses are transmitted by the teacher and absorbed by the students.	The teacher facilitates learning by providing an environment that promotes discovery and assimilation/accommodation.	Collaborative learning is facilitated and guided by the teacher. Group work is encouraged.





### **Program Outcomes**

The program outcomes are related to the institution's mission to prepare Emergency Medical Services personnel who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

#### **Student Satisfaction Program Outcomes**

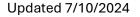
Axon Education measures student satisfaction using the ten student satisfaction outcomes listed in the table below.

Satisfaction Outcome Number	Student Satisfaction Program Outcomes	Measurement
INS-S101	NS-S101 Students will agree or strongly agree that the admissions/enrollment process was user-friendly at an 80% satisfaction rate or better.	
INS-S102		Student Survey
Students will agree or strongly agree that the content was delivered in a		Student Survey
INS-S104	Students will agree or strongly agree that the online system was effective in guiding their progress at an 80% satisfaction rate or better.	Student Survey
INS-S105	Students will agree or strongly agree to knowing how to obtain help if they needed it at an 80% satisfaction rate or better.	Student Survey
INS-S106 Students will agree or strongly agree that the Axon faculty and staff cared St		Student Survey
INS-S107 Students will agree or strongly agree that they would recommend this		Student Survey
INS-S108		Student Survey
INS-S109	Students will agree or strongly agree that course expectations and deadlines were clearly provided at an 80% satisfaction rate or better.	Student Survey
INS-S110	INS-S110 Students will agree or strongly agree that the instructor(s) maintained regular contact with them during the course at an 80% satisfaction rate or better.	
INS-S111	Students will agree or strongly agree that the instructor(s) were aware of their course progress at an 80% satisfaction rate or better.	Student Survey

### **Completion Rates Program Outcomes**

Axon Education measures program completion rate using the three completion rate outcomes listed in the table below.

Completion Outcome Number	Completion Rates Program Outcomes	Measurement
EMS-CR101	80% of students fully enrolled in EMS programs will	Completion Reports





Completion Completion Rates Program Outcomes		Measurement
	complete the program.	
	70% of students who achieve a completion certificate in EMS programs will pass the NREMT.	NREMT Passing Rate, Completion Reports
		Track Graduates, Follow-up Surveys, Employer Engagement

### **Student Achievement Program Outcomes for Emergency Medical Technicians**

Axon Education measures student achievement in cognitive, psychomotor, and affective skills using the twenty student achievement outcomes listed in the table below.

### **EMT Program Outcomes**

Program Outcomes	Student Achievement Program Outcomes
EMT-P100	To prepare Emergency Medical Technicians who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.
EMT-P101 (KPI-C101)	Individuals who achieve Census Status will complete the program within 150% of the published maximum allowable timeframe.
EMT-P102 (KPI-C102)	Graduates will achieve a passing score on the program-appropriate NREMT computer adaptive test in three or less attempts.
EMT-P103 (KPI-C103)	Within one year of graduation, graduates will achieve Positive Placement. Positive Placement means the graduate will be employed full or part-time, or volunteer in the profession or in a related field, will be continuing his/her education or will be serving in the military within one year of graduation.
EMT-P104	Students will be able to consistently conduct excellent TRAUMA assessments appropriate for the program's scope of practice.
EMT-P105	Students will be able to consistently conduct excellent MEDICAL assessments appropriate for the program's scope of practice.
EMT-P106	Students will be able to conduct and lead Cardiopulmonary Resuscitation (CPR) in a manner that provides high-quality chest compressions, appropriate ventilations, and early use of an AED.
EMT-P107	Students will demonstrate an understanding of the Health Insurance Portability Accountability Act (HIPAA) and use due care to avoid inappropriately sharing sensitive patient health information.
EMT-P108	Students will demonstrate an understanding of their appropriate scope of practice by using or refraining from using a variety of available treatments, techniques, or actions.
EMT-P109	Students will demonstrate the ability to write an effective narrative that includes items suitable to be included in a Patient Care Report (PCR).
EMT-P110	Students will demonstrate appropriate affect and act professionally toward all stakeholders for the duration of the program.





### **Advanced EMT Program Outcomes**

Program Outcomes	Student Achievement Program Outcomes
AEMT-P100	To prepare Advanced Emergency Medical Technicians who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.
AEMT-P101 (KPI-C101)	Individuals who achieve Census Status will complete the program within 150% of the published maximum allowable timeframe.
AEMT-P102 (KPI-C102)	Graduates will achieve a passing score on the program-appropriate NREMT computer adaptive test in three or less attempts.
AEMT-P103 (KPI-C103)	Within one year of graduation, graduates will achieve Positive Placement. Positive Placement means the graduate will be employed full or part-time, volunteer in the profession or in a related field, continue his/her education, or serve in the military.
AEMT-P104	Students will be able to consistently conduct excellent TRAUMA assessments appropriate for the program's scope of practice.
AEMT-P105	Students will be able to consistently conduct excellent MEDICAL assessments appropriate for the program's scope of practice.
AEMT-P106	Students will be able to conduct and lead Cardiopulmonary Resuscitation (CPR) in a manner that provides high-quality chest compressions, appropriate ventilations, and early use of an AED.
AEMT-P107	Students will demonstrate an understanding of the Health Insurance Portability Accountability Act (HIPAA) and use due care to avoid inappropriately sharing sensitive patient health information.
AEMT-P108	Students will demonstrate an understanding of their appropriate scope of practice by using or refraining from using a variety of available treatments, techniques, or actions.
AEMT-P109	Students will demonstrate the ability to write an effective narrative that includes items suitable to be included in a Patient Care Report (PCR).
AEMT-P110	Students will demonstrate appropriate affect and act professionally toward all stakeholders for the duration of the program.

### Paramedic Program Outcomes

Program Outcomes	Student Achievement Program Outcomes
$P \Delta R_{P} P_{1} O O$	To prepare Paramedics who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.
	Individuals who achieve Census Status will complete the program within 150% of the published maximum allowable timeframe.
	Graduates will achieve a passing score on the program-appropriate NREMT computer adaptive test in three or less attempts.
PAR-P103 (KPI-C103)	Within one year of graduation, graduates will achieve Positive Placement. Positive Placement means the graduate will be employed full or part-time, or volunteer in the profession or in a related field, or will be continuing his/her education, or will be serving in the military within one year of graduation.
PAR-P104	Students will be able to consistently conduct excellent TRAUMA assessments appropriate for the program's scope of practice.





Program Outcomes	Student Achievement Program Outcomes
	Students will be able to consistently conduct excellent MEDICAL assessments appropriate for the program's scope of practice.
PAR-PIN6	Students will be able to conduct and lead Cardiopulmonary Resuscitation (CPR) in a manner that provides high-quality chest compressions, appropriate ventilations, and early use of an AED.
	Students will demonstrate an understanding of the Health Insurance Portability Accountability Act (HIPAA) and use due care to avoid inappropriately sharing sensitive patient health information.
	Students will demonstrate an understanding of their appropriate scope of practice by using or refraining from using a variety of available treatments, techniques, or actions.
	Students will demonstrate the ability to write an effective narrative that includes items suitable to be included in a Patient Care Report (PCR).
IPAR-P110	Students will demonstrate appropriate affect and act professionally toward all stakeholders for the duration of the program.

### **Graduation/Program Completion**

The graduation/program completion requirements for the certification programs at Axon Education are comprehensive to ensure high-quality training and preparedness for real-world emergency medical care.

- For the EMT Certification Program, students must complete all assigned coursework and modules, maintaining a minimum grade of 70% in all final exams. They must successfully complete all practical skills labs and simulations, demonstrating competency in essential EMT skills such as CPR, patient assessment, and airway management. Additionally, students are required to complete all clinical experiences in an approved healthcare setting and field internship hours with an approved EMS provider, documenting all patient contacts and procedures performed. Finally, students must pass a comprehensive final written exam with at least 70% and a practical skills exam demonstrating competency in all required skills.
- For the AEMT Certification Program, students must complete all assigned coursework and modules, maintaining a minimum grade of 70% in all final exams. They must successfully complete all practical skills labs and simulations, demonstrating competency in essential EMT skills such as CPR, patient assessment, and airway management. Additionally, students are required to complete all clinical experiences in an approved healthcare setting and field internship hours with an approved EMS provider, documenting all patient contacts and procedures performed. Finally, students must pass a comprehensive final written exam with at least 70% and a practical skills exam demonstrating competency in all required skills.
- For the Paramedic Certification Program, students must complete all coursework and modules, with a minimum grade of 70% on exams. Students are required to successfully complete advanced practical skills labs and simulations, demonstrating competency in





skills such as advanced airway management, cardiac monitoring, and medication administration. The clinical experience requirement is more extensive, with a minimum of 240 hours in various healthcare settings, including emergency departments, intensive care units, and labor and delivery units. Students must also complete a minimum of 480 hours of field internship with an approved EMS provider, demonstrating proficiency in advanced pre-hospital care. Paramedic students must also complete a capstone project demonstrating the integration and application of knowledge and skills acquired during the program. They must pass a comprehensive final written exam with at least 70% and a practical skills exam demonstrating advanced competency in all required skills.

Additionally, for all programs, students will receive a certificate which allows them to take the National Registry of Emergency Medical Technicians (NREMT) certification exam applicable to their program, maintain current CPR certification throughout the program, meet all health and safety requirements including immunizations.

### **Admissions Policies**

- Admission [<u>02.01.001</u>]
- Admission Requirements [02.04.001]
- Non-Discrimination [02.06.000]
- Program Admission and Enrollment [02.01.100]
- Enrollment Status [02.01.002]
- Photo ID Requirements [02.01.013]
- Identity Verification [02.01.007]
- Residency Policy [02.11.005]
- Notification of Admission Decision [02.01.009]
- Cohort Placement [<u>02.01.004</u>]
- Enrollment Eligibility for Visa Holders [02.11.006]
- Criminal History Impact on Admission [02.01.020]
- Census Status [<u>02.01.015</u>]
- Flu Vaccination [<u>02.04.003</u>]
- English Proficiency Requirements [02.01.008]
- Admissions Appeal [02.01.003]

### **Uniform and Hygiene Requirements**

• Student Dress and Hygiene [02.02.004]



### **Flexible Time Formats for Courses**

As stated in your Enrollment Agreement, the course/s in the program is/are offered in a Flexible Time Format. The use of the Flexible Time Format makes it possible to complete the course prior to the Maximum Instructional Deadline and prior to the final date of the Maximum Course Duration, which are both explained in the syllabus. Please let Student Support or your instructor know if you have any questions or concerns. studentsupport@axoneducation.com 325-218-4444

### Learning Management System(s)

### Canvas

Axon Education utilizes the Canvas Learning Management System (LMS). Such an approach assures the most up-to-date content as it relates to curriculum (best-of-class approach), high reliability, and ease of development.

### **Emphasize Mobile**

Near ubiquitous adoption of smartphones/devices has created an environment in which it is essential that materials be made available for use and viewing on smart devices. Clickable links are used where possible to allow the student to avoid having to re-type URLs or credentials.

### **Technical Standards and Job Description for EMS Programs**

• Technical Standards and Functional Job Description for EMS Programs and Professions [02.11.101]

### **Specific Course Parameters**

- EMT: MID = 20 weeks, MCD = 26 weeks
- EMT Accelerated: MID = 15 weeks, MCD = 17 weeks
- Advanced EMT: MID = 33 weeks, MCD = 40 weeks
- Advanced EMT Accelerated: MID = 30 weeks, MCD = 34 weeks
- Paramedic: MID = 70 weeks, MCD = 78 weeks
- Paramedic Accelerated: MID = 48 weeks, MCD=52 weeks



- Paramedic Bridge: MID = 70 weeks, MCD=78 weeks
- Paramedic Bridge Accelerated: MID = 48 weeks, MCD=52 weeks

### **Program Critical Criteria for All Programs**

The programs/courses are a part of EMS Certification programs, which contain several Critical Criteria that, if unmet, could result in the issuance of a failing final grade for the program, regardless of the student's success or performance in other aspects of the program.

### **Critical Criterion #1 – Compliance Deadline Criterion**

Students must submit all necessary compliance documentation by the Compliance Date, which is 30 days from their enrollment date.

### Critical Criterion #2 – Minimum Activity Criterion

During the Instructional Period (or time period for the MID of the course or program), students must log in and complete at least one assignment each week. Minimum activity is evaluated each Monday for the preceding seven days (Monday through Sunday). Students attending a Skills Lab or participating in a Clinical Experience or Field Experience may request an exemption for the actual week in which the student was involved in the face-to-face activity.

#### **Critical Criterion #3 – Student Responsiveness Criterion**

The Teaching Team may establish that an individual has failed to achieve the Student Responsiveness Criterion by evaluating their pattern of communication. Students are expected to adequately respond to institutional inquiries in a timely manner. A student's adequate and timely responses to written inquiries, text messages, voicemails, and other means of communications from institutional representatives are considered mandatory elements of course progress, even when such inquiries are not directly related to academic performance.

#### **Critical Criterion #4 – Positive Affect Criterion**

The Teaching Team may establish that an individual has failed to achieve the Positive Affect Criterion if a student exhibits ongoing or acutely disruptive affect or unprofessional behavior toward fellow students, institutional personnel, clinical partner personnel, or other stakeholders. Satisfactory student progress in this regard is established, among other means, by demonstrating a willingness to work as a productive team member with other students, and especially with clinical partners. Satisfactory progress is also measured by dressing, speaking, and acting professionally while in school contexts.





### **Student Support**

### Student Support Channel

The Zoho Desk system is the source of authority for all student support transactions. Support requests received through communication channels that are not directly supported by the Desk system should be manually translated into individual tickets. Where possible, students should be encouraged to use support@axoneducation.com as their primary method of support.

Students needing assistance may contact support via:

- Email: <a href="mailto:support@axoneducation.com">support@axoneducation.com</a>
- Voice: 325-218-4444
- SMS/Text: 325-218-4444

All Student Support may be found on the student resources website at <u>https://axoneducation.com/student-resources/</u>.

### **Academic Requirements**

- Academic Honesty and the Honor Code [02.03.001]
- Satisfactory Academic Progress [02.03.005]
- Student Success Calls [02.08.005]
- Tutoring [<u>02.08.006</u>]
- Grading [02.03.006]
- Momentum [<u>02.08.004</u>]
- Minimum Activity Policy [02.08.001]
- Maximum Course Duration [02.09.000]
- Advanced Placement [02.01.011]
- Advanced Placement Previous Clinical Field Experiences [02.01.014]
- Transfer Credit [02.01.012]
- Breaks and Furloughs [02.08.003]
- Proctoring [<u>02.03.002</u>]
- Academic Evaluation of Affective Behavior (EMS Programs) [02.02.003]
- Academic Probation [04.02.013]
- Academic Suspension [04.02.014]
- Cancellation Policy [04.02.004]
- Streamlined Readmission [02.01.005]



### **Student Confidentiality and Privacy**

• Student Confidentiality and Privacy [02.01.006]

### Grading

- Academic Evaluation of Affective Behavior (EMS Programs) [02.02.003]
- Grading Scale [02.03.006]

### Technology

- Technology Requirements [02.01.010]
- Proctoring [02.03.002]
- Two-Factor Authentication [03.20.003]

### **Student Grievances and Appeals**

• Student Grievances and Appeals [02.07.000]

### **Counseling and Placement Services**

- Career Counseling and Placement Services [02.03.003]
- Job Placement

The institution does not provide career placement services. However, the institution maintains a job board on its website that identifies possible job opportunities. Students may review the website to see what job opportunities are available.

#### **Psychological Counseling**



The institution does not provide licensed counselors or psychotherapists for personal counseling.

### **Student Health and Safety**

### Axon Education Exposure Control Plan

Axon Education attempts to provide the safest possible environment for educational experiences as it relates to providing an environment free of infectious diseases that bloodborne pathogens or respiratory pathogens may contract. Students, employees, and visitors should be aware that educational environments, which include contact with live patients, involve the potential for Occupational Exposure. Healthcare curriculum includes significant training as it relates to Body Substance Isolation or the use of Personal Protective Equipment (PPE).

### **Student Finances**

- Program Pricing [04.01.102]
- EMT Program/Course Costs
  - o \$1,595.00 Tuition
  - \$1,870.00 TOTAL TUITION AND FEES
- Advanced EMT Program/Course Costs
  - \$75.00 Application Fee (Non-Refundable)
  - \$200.00 Registration/Access Fee (Non-Refundable)
  - \$4,200.00 Tuition
  - \$4,475.00 TOTAL TUITION AND FEES
- Paramedic Program/Course Costs
  - \$75.00 Application Fee (Non-Refundable)
  - \$200.00 Registration/Access Fee (Non-Refundable)
  - \$7,500.00 Tuition
  - \$7,775.00 TOTAL TUITION AND FEES
- General Payment Policy [04.01.101]
- Payment Options [04.01.100]
- Installment Payments for Students with Previous Adverse Action [04.01.102]
- Withholding a Student Record for Financial Purposes [04.01.200]
- Federal Tax Reporting to Students [04.02.011]
- Financial Assistance



- Federal Financial Aid
- Axon Education does not accept Federal Student Assistance Title IV funds.
- Rebate Opportunity Requirements [04.02.010]

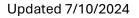
### **Cancellation**, Withdrawal and Refunds

- Cancellation [<u>04.02.004</u>]
- Calculating Refund Eligibility [04.02.000]
- Tuition Refund Policy [04.02.001]
- Refund Policy for Non-Tuition or Fee Items [04.02.002]
- Non-Refundable Fees [04.02.007]
- Refund Policy for Expenses from Third Party Vendors [04.02.003]
- Refund Fulfillment [04.02.060]

### **Attendance Policies**

The courses are competency-based and are presented in an online format. There are no mandatory daily or weekly sessions. Instead, students can move through the curriculum as quickly as they are able within a set of parameters (See Maximum Course Duration). There are mandatory face-to-face sessions and/or electronic meetings that must be attended; however, most of these sessions are scheduled by the student. Attendance at skills labs, clinical experiences, field experiences, and scheduled tutoring sessions are tracked, and students failing to appear or who arrive late participation will be required to make up all sessions or missed content.

Students often already work with clinical providers or have relationships with personnel in local emergency rooms or ambulance services and wish to complete their field experiences at these locations. Axon is willing and interested in forming a relationship with any qualified clinical provider. However, in order for a clinical site or field site to be used, the organization must have signed an Affiliation Agreement with Axon. Many organizations are willing to complete the agreement if they have local students who are requesting it. However, it often takes several weeks for an organization to review and sign official documents, so if you are interested in helping arrange such a relationship, you should start the process as early as possible to avoid delays. Contact support@axoneducation.com to request that a site be considered. You then need to work with Student Support staff to facilitate the dialogue with the potential provider. You will only be able to utilize the facility if a signed agreement is in place.





# Clinical, Field, and Internship Requirements for EMS Programs [02.11.102]

- Student Dress and Hygiene [02.02.004]
- Skills Lab Prerequisites [02.05.005]
- Skills Lab Student-to-Faculty Ratio [02.11.004]
- Compliance | Clinical Requirements [02.04.002]
- Clinical Scheduling and Documentation [02.04.004]
- Clinical Cancellation Policy [02.04.005]

### **Skills Lab Attendance Policies**

Skills Labs are conducted regularly at the Abilene and Houston class locations. Students must schedule their first Skills Lab within 60 days of their official cohort start date and, when able, based on current offerings, all Skills Labs. Students are encouraged to sign up for the Skills Labs as early in the course as possible to ensure that they are able to attend sessions that are convenient to them in terms of timing. Finally, students are also encouraged to get away from routine responsibilities such as other schooling, work, family obligations, etc., during Skills Labs due to the need to focus intently on the lab instruction. Students may register online by visiting https://www.axoneducation.com/skills/.

Students should also arrange for travel and sleeping accommodation as soon as possible after they have registered for their desired session dates.

#### **Attendance Policy Specific to Skills Labs for EMT Students**

Students are required to attend at least one face-to-face Immersive Skills Lab, which generally lasts two days. During these labs, students learn and practice hands-on skills and ultimately prepare for the NREMT Psychomotor Examination. Skills Labs are graded on a pass/fail basis. Students may be precluded from proceeding to the next steps in this course if they have not demonstrated competency in particular psychomotor skills.

### Attendance Policy Specific to Skills Labs for AEMT and Paramedic Students

AEMT and Paramedic students are required to attend at least three face-to-face Immersive Skills Labs, Which generally last two days. During these labs, students learn and practice handson skills and ultimately prepare for the NREMT Psychomotor Examination. Students may be required to attend an additional Skills Lab if they have not demonstrated competency in the clinical/field setting.





### **Clinical and Field Internship Sites**

Clinical and field internship sites will know with confidence what a student can or cannot do based upon the administration of the Axon Education Preceptor Orientation delivered to at least one on-site member of the clinical and field sites. An effort is made to distribute this to all clinical/field/internship sites, and beyond that, students are instructed to share with each preceptor their current education level and skill needs. Students are not able to sign up for clinical/field opportunities until after they have completed the required skill session(s) for their program. This process allows the instructor to ensure that each individual student is adequately prepared to operate within the scope of the clinical/field experience they are attending.

While the system itself will provide the primary safeguard to avoid allowing students to serve in a capacity for which they are not approved, students will also be coached to assist field and clinical site administrators and preceptors in reviewing documentation, evaluating student performance, and communicating with Axon Education regarding student progress. The student portfolio made available to all stakeholders will include the current level of training, current skills signed sheets, and training objectives.

Axon Education staff will offer an orientation to field and clinical site personnel to help them understand the components of the clinical/field tracking systems. This should ensure that a site, the preceptor, and all other stakeholders have immediate and accurate access to information regarding a student's capability. Each site will have slightly different requirements regarding how this documentation needs to be provided, and the field/clinical tracking systems will allow both online and paper access to the information in such a way as to meet the requirements of every site.

### **Attendance Policy Specific to Clinical/Field Experiences**

Students must initiate the scheduling of their clinicals within 30 days of completing their first Skills Lab. Late arrival to, or failure to attend, a scheduled clinical experience or field experience without notifying Axon Education in advance will be treated as unprofessional behavior and may result in a breach of Critical Criterion #4 – Positive Affect (see below), and it could result in the student failing the course. It is understood that in rare cases, emergencies happen that could prevent a student from notifying Axon Education of the late arrival or cancellation in advance. Still, pre-notification of late arrival or cancellation is expected in all cases. All missed clinical experiences or field experiences must be made up. The Teaching Team may also assign remedial work or additional shifts in cases where shifts, or portions of shifts, were missed.





### **Clinical Internship**

Each student must complete a prescribed number of hours and/or competencies related to clinical internship (interchangeably referred to as clinicals, hospital rotations, and/or clinical experiences). Clinical internships will be conducted in a hospital setting (site).

Students in the EMTB course will need to complete 24 hours of hospital rotation and 48 hours of EMS. Students in the AEMT/Paramedic courses will need to complete 72 hours of hospital rotation and 72 hours of EMS and the competencies listed in the Appendix of this document.

Clinical internships may only be completed with sites where Axon Education has obtained a signed affiliate agreement. Axon Education desires to be student-oriented in every regard and will attempt to accommodate the special needs of students who may not be geographically near existing sites. While students should assume upon admission that they will participate at currently existing sites, students may request that Axon Education seek an affiliation with a site that is geographically advantageous to a student or group of students. It is the student's responsibility to request that a site be considered several weeks prior to the time in which the site will actually be needed. If a student does not have a relationship with someone at the proposed site or if the site has overly restrictive requirements, the site may not be considered or contacted. In such a case, the student will be required to complete clinical internship requirements at existing approved sites.

Some hospitals require an on-site orientation before the student can begin clinical rotations. This orientation is not considered part of the 24 hours of patient clinical contact time and must be completed before patient contact occurs.

The scheduling, attendance, and professional conduct of clinical internships is one of the most important elements upon which students will be evaluated. Students who cannot demonstrate an ability to schedule and attend clinical internships successfully will not succeed. Additionally, students who do not demonstrate respect and professional conduct while participating in clinical internships will be dismissed from the program. Axon Education will attempt to schedule a student's clinical time based on the student's preferred times and locations. Due to the availability of clinic sites, this may not always be possible. It is ultimately the student's responsibility to accommodate scheduling based upon the availability of sites, preceptors, and other factors. Except in the unusual circumstance of an emergency, students are expected to notify Axon Education and the clinical site in advance if they are unable to attend. It is the responsibility of the student to arrive on time and stay the entire scheduled time. Missing any assigned clinical rotation, being excessively late, or leaving early may result in a student's dismissal from the program.

During clinical rotations, an incident may occur that could potentially harm the student's wellbeing. These can include injury, needle sticks, and blood-borne pathogen exposure. If an incident occurs, students must notify a preceptor immediately and inform the clinical coordinator as soon as possible.





During EMT clinical rotations, students will need to complete the following skills:

- 1. Perform patient assessments to include:
- 2. Perform a primary assessment to rule out life threats;
- 3. Ascertain the patient's history, including HPI, PMH, medications, and allergies;
- 4. Assess vital signs;
- 5. Perform a secondary assessment;
- 6. Develop a clinical impression and discuss it with the physician or nurse;
- 7. Perform the necessary documentation required by the instructor;
- 8. Auscultate breath sounds in their proper landmarks and provide oxygen therapy as needed for patient treatment;
- 9. Display the behaviors needed to become a professional EMS provider;
- 10. Be a team player and do whatever tasks are asked by a preceptor (If a student is asked to do something that falls outside his/her scope of training or practice, it is important that he/she share that with his/her preceptor immediately and document this in his/her clinical documentation.); and
- 11. Ensure that the proper documentation of all patient care encounters is on the appropriate Axon Education forms and signed by the preceptor.

The same skills are required for AEMT, but the student must also demonstrate proficiency in the following skills:

- 1. IV Access
- 2. Medication Administration
- 3. Endotracheal Intubation

The same skills are required for the Paramedic program but will also include the competencies from the Student Minimum Competency (SMC) Matrix.

### **Field Internship**

The EMS field internship is an exciting time in a student's educational process, which should be enjoyed and treated with respect.

- Students in the EMT Basic program are required to complete 48 hours of field internship and the list of competencies from the Student Minimum Competency (SMC) Matrix.
- Students in the AEMT program are required to complete 72 hours of field internship and the list of competencies from the Student Minimum Competency (SMC) Matrix.
- Students in the Paramedic Program are required to complete 96 hours of field internship and all skills and competencies from the Student Minimum Competency (SMC) Matrix.





Field internships may only be completed at sites with a signed affiliate agreement with Axon Education. Axon Education desires to be student-oriented in every regard and will attempt to accommodate the special needs of students who may not be geographically near existing sites. While students should assume upon admission that they will participate at currently existing sites, students may request that Axon Education seek an affiliation with a site that is geographically advantageous to a student or group of students. It is the student's responsibility to request that a site be considered several weeks prior to the time in which the site will actually be needed. If a student does not have a relationship with someone at the proposed site or if the site has overly restrictive requirements, the site may not be considered or contacted. In such a case, the student will be required to complete field internship requirements at existing approved sites.

Successful completion of the field internship must include the following:

- 1. Attending the field internship orientation prior to beginning the field rotation, if required by the internship site.
- Completion of all scheduled hours must be documented prior to course completion. Missed field rotations must be rescheduled as soon as possible. If a student leaves early from his or her field internship, then this will be considered a missed rotation.
- 3. Arriving at least 15 minutes prior to the start of a field internship start time.
- 4. Being aware that field internships may need to be completed during various shifts. This may include day, night, overnight, and weekend shifts.
- 5. Providing preceptors with an Axon Education evaluation sheet at the end of each shift that has been filled out and signed by the student. The preceptor must sign off on the skill sheet at the end of the student's scheduled rotation.
- 6. Being prepared and having all required equipment during the field internship.

### **Capstone Field Internship for Paramedic Students**

In addition to the above requirements, Paramedic students will also be expected to complete a Capstone Field Internship. The Capstone Field Internship will serve to allow the student/paramedic candidate to operate in the role of lead paramedic on a working ambulance operating in a 911/emergency setting. Students will continue to demonstrate and document competencies which include skills performed or interpreted across a variety of patient ages, differential diagnoses, or complaints, but as a part of the Capstone Field Internship will focus on completing and documenting a specific number of team leads representing a variety of skills. It is impossible to predict the frequency or mix of live-patient encounters that may occur during a given field internship experience. As a result, it is impossible to specify in advance the number of hours which may be required to complete the Capstone Field Internship. The requirements for the course presume a nominal face-to-face involvement of at least 120 hours. Students are responsible for scheduling and completing a sufficient number of field internship hours





necessary to obtain the minimum number of 120 hours and 20 team leads that are transported to the emergency department.

### **Participation in Patient Care**

The Medical Director has approved the process of not allowing students to begin clinical/field opportunities until they have attended a skills session(s) required by their program. The instructors have been authorized to sign off on the student's attendance of clinical/field opportunities following this process.

The scheduling and skills tracking software allows all stakeholders, including the physician medical director of the field internship site, to be confident that students are at the appropriate stage in their learning to participate in patient care. There is a specific workflow within the system that allows anyone who interacts directly with students to create, monitor, or alter student approvals.

The Axon Education policies for clinical and field internship requirements and procedures are integrated into its other policies and included in student-facing documents elsewhere.

### **Specific Program Information**

EMT

#### **EMT Program Goal**

To prepare Advanced EMTs who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

#### **EMT Student Learning Outcomes**

- Graduates will be prepared to pass the National Registry of Emergency Medical
- Technicians Cognitive Examination and Psychomotor Examination(s).
- Graduates will be eligible to seek employment or volunteer opportunities in basic emergency care in a variety of contexts.
- Graduates will be able to conduct excellent medical and trauma assessment and manage appropriate patient-care interventions for patients of various ages.
- Graduates will be able to provide professional and





compassionate care in a diverse and multicultural society and as a part of a team of healthcare providers.

• Graduates will be prepared to evaluate their own ethical boundaries and create for themselves strategies for self-directed and life-long learning.

The MAXIMUM INSTRUCTIONAL DEADLINE (MID) for this course is 18 weeks. Students will have 18 weeks from the cohort start date to complete all online assignments and complete at least one attempt at the FISDAP (Field Internship Student Data Acquisition Project) Comprehensive Readiness Exam.

The MAXIMUM COURSE DURATION (MCD) is 26 weeks. This provides eight (8) weeks beyond the Instructional Period for students to participate in a Test Preparation period in which they will be allowed to continue their studies to ensure their readiness to schedule their exam with the National Registry of Emergency Medical Technicians.

Students who remain in the course after the Instructional Period but prior to the end of the Maximum Course Duration may be assigned additional mandatory activities necessary for course completion. While Axon Education courses each have a Maximum Instructional Period and a Maximum Course Duration, the courses employ adaptive learning technologies and are highly personalized for each student. Students may complete the course as rapidly as they are able to meet all requirements.

Because this course is based upon a Flexible Time Schedule, it is possible that a student may be assigned a failing grade for the course prior to the end of the Instructional Period or the deadline for the Maximum Course Duration. Causes for course failure include but are not limited to violations of the Minimum Activity Policy, positive results on the required drug screening, failure to meet compliance deadlines for documentation related to admission requirements, dismissal, and other items articulated in the course syllabus.

#### **TUITION and FEES**

#### **EMT-B Program/Course Costs**

\$75.00 Application Fee (Non-Refundable)\$200.00 Registration/Access Fee (Non-Refundable)\$1,595.00 Tuition



#### \$1,870.00 TOTAL TUITION AND FEES

#### During EMT clinical rotations, students will need to complete the following skills:

- 1. Perform patient assessments to include:
- 2. perform a primary assessment to rule out life threats;
- 3. ascertain the patient's history, including HPI, PMH, medications, and allergies;
- 4. assess vital signs;
- 5. perform a secondary assessment;
- 6. develop a clinical impression and discuss it with the physician or nurse;
- 7. perform the necessary documentation required by the instructor;
- 8. auscultate breath sounds in their proper landmarks and provide oxygen therapy as needed for patient treatment;
- 9. always practice body substance isolation procedures;
- 10. display the behaviors needed to become a professional EMS provider;
- 11. be a team player and do whatever tasks are asked by a preceptor (If a student is asked to do something that falls outside his/her scope of training or practice, it is important that he/she share that with his/her preceptor immediately and document this in his/her clinical documentation.); and

ensure that the proper documentation of all patient care encounters is documented on the appropriate Axon Education forms and signed by the preceptor

#### Advanced EMT (AEMT)

#### Advanced

#### Advanced EMT Student Learning Outcomes

- Graduates will be prepared to pass the National Registry of Emergency Medical Technicians AEMT Cognitive Examination and Psychomotor Examination(s).
- Graduates will be eligible to seek employment or volunteer opportunities in advanced emergency care in a variety of contexts.
- Graduates will be able to conduct excellent medical and trauma assessment and manage appropriate patient-care interventions for patients of various ages.
- Graduates will be able to provide professional and compassionate care in a diverse and multicultural society and as a part of a team of healthcare providers.
- Graduates will be prepared to evaluate their own ethical boundaries and create for themselves strategies for self-directed and life-long learning.

This program includes a minimum of 1095 contact hours. The MAXIMUM INSTRUCTIONAL DEADLINE (MID) for this course is 33 weeks. Students will have 33 weeks from the cohort start date to complete all online assignments and complete at least one attempt at the FISDAP (Field Internship Student Data Acquisition Project) Comprehensive Readiness Exam. The MAXIMUM COURSE DURATION (MCD) is 40 weeks. This provides students approximately seven (7) weeks





beyond the Instructional Period to participate in a Test Preparation period in which they will be allowed to continue their studies to ensure their readiness to schedule their exam with the National Registry of Emergency Medical Technicians. Students who remain in the course after the Instructional Period but prior to the end of the Maximum Course Duration may be assigned additional mandatory activities necessary for course completion. While Axon Education courses each have a Maximum Instructional Period and a Maximum Course Duration, the courses employ adaptive learning technologies and are highly personalized for each student. Students may complete the course as rapidly as they are able to meet all requirements. Because this course is based upon a Flexible Time Schedule, it is possible that a student may be assigned a failing grade for the course prior to the end of the Instructional Period or the deadline for the Maximum Course Duration. Causes for course failure include but are not limited to violations of the Minimum Activity Policy, positive results on the required drug screening, failure to meet compliance deadlines for documentation related to admission requirements, dismissal, or other items articulated in the course syllabus.

### Additional Admission Requirements for the Advanced EMT Program

Candidates for EMT-P must have certification as an EMT-Basic or Advanced EMT.

### Grading

This course is offered to fulfill the requirements of an EMTB Certification course. A final grade will be issued for the course after completion. There are two crucial characteristics of course grades that the student needs to consider:

- 1. While grades for individual courses may be used to identify areas of competency for the Axon program, these grades will not be articulated to Axon Education partners for inclusion in degree programs unless the student successfully completes the entire program and becomes eligible to participate in the National Registry of Emergency Medical Technicians Psychomotor Examinations and Cognitive Examination. Students may not expect articulation of individual course credits in absence of success in the entire certification program.
- 2. There are programmatic Critical Criteria discussed elsewhere in this document that, if unmet, could result in the issuance of a failing final grade for the program, regardless of the student's success or performance in other aspects of the program. Failure to meet these Critical Criteria for the entire program could effectively negate articulated credit for any course included in the program to other institutions.

This course is competency-based overall, which allows for students to improve their performance in most areas. Generally, students are allowed and encouraged to attempt completion of assignments as many times as necessary to achieve a satisfactory grade or as often as desired to improve a grade or enhance competency. In most cases, assignments are considered "open-book," which means that the student is encouraged to use all tools at their disposal to demonstrate success for the task at hand. In certain limited cases, assignments or





examinations may be proctored and may include specific limitations on the environment in which the activity is completed, or limitations on the tools or resources that may be used as a part of the effort.

# **Affective Grade**

The Axon Education Latin Motto is *"Primum Respectum Date"* (PREE-mum res-PECT-um DAHtay), which means "first give respect." In other words, Axon is encouraging its students to offer respect to others, even before they earn it. When students choose to show respect to everyone they come in contact with, they will cause others to respect them and create an atmosphere that is less likely to be clouded with bigotry, racism, and inappropriate judgment. Each student should carefully read Critical Criterion #4 – Positive Affect Criterion below. While a student's affect may not directly impact an assignment of a particular numeric or letter grade, inappropriate affect in all educational situations related to the completion of this course has the potential to cause a student to be assigned a failing grade.

# **Proctored Assignments**

Certain assignments or evaluations must be proctored. Instructions for proctored activities will be included at the time the assignment is given and may include the use of third-party organizations which provide student-proctoring. In such a case, the student will be responsible for paying for the proctoring session. The Axon Teaching Team may, at their sole discretion, require that an assignment for a particular student be proctored even if proctoring is not required for the same or similar assignment of all other students.

# **Standardized Examinations**

Examinations may be conducted using nationally standardized instruments developed and administered by third parties. In these cases, proctoring will be employed, and students may be explicitly restricted in the environment in which the exam will be conducted. Unless otherwise indicated, Axon will allow students one attempt at the nationally standardized examinations without additional costs to students on the first attempt. They will also be required to show satisfactory progress within this product. The student will have three additional attempts at no cost to the student after they have purchased the study tools. Students who are in need of additional attempts beyond the initial four attempts for any reason will be required to pay an additional nominal fee for each pair of attempts.

# **Final Exam**

This course will include a final examination. The exam may or may not require proctoring, and specific requirements will be provided in the Learning Management System. The Teaching Team has the authority to require proctoring on any assignment including final examinations. Where appropriate, final examinations may be conducted using nationally standardized exams. These exams have been administered to thousands of students each year and may provide a more





rigorous experience as well as results that are highly predictive of student success. "Cut Scores" are often assigned for final examinations that dictate the minimum score a student must achieve to successfully complete the course or program.

# **AEMT Program - Course Sequence & Course Descriptions**

# **BIOL 2401: Anatomy and Physiology**

Anatomy and Physiology provides an overview of anatomy and physiology appropriate for individuals entering an allied medical field of study. This course gives students the knowledge needed to conduct emergency medical assessments of illnesses and injuries. Topics include medical terminology, anatomy, physiology, pathophysiology, and life-span development. *Prerequisites:* Program Admission, including an existing EMTB certification or greater

# EMSP 1310: Introduction to Advanced Practice and Public Health

Introduction to Advanced Practice and Public Health provides a review of foundational Emergency Medical Service concepts to ensure that entering EMTs have an adequate historical, legal, and conceptual foundation to allow them to differentiate between basic and advanced practice. The course provides students an opportunity to evaluate their previous role in EMS in the context of the increased demands of advanced practice in terms of legal and ethical boundaries, scope of practice, and leadership requirements. The student is encouraged to examine their own goals for personal growth and psychological health in the context of advanced practice. *Prerequisites:* BIOL 2401 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

# EMSP 1320: Patient Assessment and Airway Management

Patient Assessment and Airway Management will guide the student through developing critical thinking skills related to the practice of essential and standardized medical and trauma assessment techniques in an ALS prehospital environment. The course emphasizes airway management, advanced clinical decision-making, identification and treatment of life threats, and advanced assessment techniques. *Prerequisites:* BIOL 2401, EMSP 1310 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

# EMSP 2355: Clinical & Field Portfolio (EMSP 1325, EMSP 1145, EMSP 2125 for AEMT students)



*Clinical & Field Portfolio* serves to place Paramedic students and Advanced EMT students into approved clinical and field environments in which they may complete required medical and field experiences related to both medical and trauma cases. This course is designed to assist the student in completing the electronic portfolio required to document a specific number of successful demonstrations of skills or competencies. While some of these demonstrations may be accomplished in a lab setting, many require successful demonstration of the skill during a live-patient encounter which may only be fulfilled during a clinical/field experience. It is impossible to predict the frequency or mix of live-patient encounters that may occur during a given clinical/field experience. As a result, it is impossible to specify in advance the number of hours which may be required to complete the electronic portfolio. The requirements for the course presume a nominal face-to-face involvement of at least 96 hours. EMSP 2325 is functionally equivalent to the combination of EMSP 1125: Clinical Experience 1, EMSP 1145: Clinical Experience 2, and EMSP 2125 Clinical Experience 3. Students exiting after AEMT certification will be issued credit for EMSP 1125 & EMSP 1145, while students in the Paramedic Program will be issued credit for EMSP 2325. Prerequisite: BIOL 2401, EMSP 1310, EMSP 1320 – May be concurrent with non-prerequisite courses.

# EMSP 1330: Pharmacology

*Pharmacology* provides a base-level understanding of the chemistry, classification, and regulation of pharmaceuticals. Special emphasis is given to the identification and use of medications used in the prehospital setting. Students study the impact of pharmaceuticals on medical and trauma assessment and the clinical decision-making process. The role of medical direction is discussed, as well as the optimal use of medication and the identification of adverse reactions to medications and contraindications. *Prerequisites:* BIOL 2401, EMSP 1310, EMSP 1320. This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

# EMSP 1340: Trauma Management and Life Support

*Trauma Management and Life Support* provides the student with an opportunity to apply ALS assessment and treatment requirements to the management of both simple and complex trauma emergencies. The course emphasizes the understanding of the mechanism of injury, bleeding, soft tissue trauma, burns, face and neck trauma, head and spine trauma, chest trauma, abdominal and genitourinary trauma, orthopedic trauma, and environmental emergencies. *Prerequisites:* BIOL 2401, EMSP 1310, EMSP 1320, EMSP 1330 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

# EMSP 1145: Clinical Experience 2

See EMSP 2355

# **EMSP 1350: Special Populations**



*Special Populations* addresses the special medical and trauma assessment techniques needed to best serve pediatric, geriatric, obstetric, and special-needs patients. The course emphasizes physiological differentiation and appropriate treatment strategies. *Prerequisites:* BIOL 2401, EMSP 1310, EMSP 1320, EMSP 1330, EMSP 1340 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

## Grading

This course is offered to fulfill the requirements of an EMTB Certification course. A final grade will be issued for the course after completion. There are two crucial characteristics of course grades that the student needs to consider:

- While grades for individual courses may be used to identify areas of competency for the Axon program, these grades will not be articulated to Axon Education partners for inclusion in degree programs unless the student successfully completes the entire program and becomes eligible to participate in the National Registry of Emergency Medical Technicians Psychomotor Examinations and Cognitive Examination. Students may not expect articulation of individual course credits in absence of success in the entire certification program.
- 2. There are programmatic Critical Criteria discussed elsewhere in this document that, if unmet, could result in the issuance of a failing final grade for the program, regardless of the student's success or performance in other aspects of the program. Failure to meet these Critical Criteria for the entire program could effectively negate articulated credit for any course included in the program to other institutions.

This course is competency-based overall, which allows students to improve their performance in most areas. Generally, students are allowed and encouraged to attempt completion of assignments as many times as necessary to achieve a satisfactory grade or as often as desired to improve a grade or enhance competency. In most cases, assignments are considered "openbook," which means that the student is encouraged to use all tools at their disposal to demonstrate success for the task at hand. In certain limited cases, assignments or examinations may be proctored and may include specific limitations on the environment in which the activity is completed, or limitations on the tools or resources that may be used as a part of the effort.

# **Affective Grade**

The Axon Education Latin Motto is *"Primum Respectum Date"* (PREE-mum res-PECT-um DAHtay), which means "first give respect." In other words, Axon is encouraging its students to offer respect to others, even before they earn it. When students choose to show respect to everyone they come in contact with, they will cause others to respect them and create an atmosphere that is less likely to be clouded with bigotry, racism, and inappropriate judgment. Each student should carefully read Critical Criterion #4 – Positive Affect Criterion below. While a student's affect may not directly impact an assignment of a particular numeric or letter grade,





inappropriate affect in all educational situations related to the completion of this course has the potential to cause a student to be assigned a failing grade.

# **Proctored Assignments**

Certain assignments or evaluations must be proctored. Instructions for proctored activities will be included at the time the assignment is given and may include the use of third-party organizations which provide student-proctoring. In such a case, the student will be responsible for paying for the proctoring session. The Axon Teaching Team may, at their sole discretion, require that an assignment for a particular student be proctored even if proctoring is not required for the same or similar assignment of all other students.

## **Standardized Examinations**

Examinations may be conducted using nationally standardized instruments developed and administered by third parties. In these cases, proctoring will be employed, and students may be explicitly restricted in the environment in which the exam will be conducted. Unless otherwise indicated, Axon will allow students one attempt at the nationally standardized examinations without additional costs to students on the first attempt. They will also be required to show satisfactory progress within this product. The student will have three additional attempts at no cost to the student after they have purchased the study tools. Students who are in need of additional attempts beyond the initial four attempts for any reason will be required to pay an additional nominal fee for each pair of attempts.

### **Final Exam**

This course will include a final examination. The exam may or may not require proctoring, and specific requirements will be provided in the Learning Management System. The Teaching Team has the authority to require proctoring on any assignment including final examinations. Where appropriate, final examinations may be conducted using nationally standardized exams. These exams have been administered to thousands of students each year and may provide a more rigorous experience as well as results that are highly predictive of student success. "Cut Scores" are often assigned for final examinations that dictate the minimum score a student must achieve to successfully complete the course or program.

# Paramedic (EMT-P)



# Paramedic Program Goal

To prepare Paramedics who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

# Paramedic Student Learning Outcomes

- Graduates will be prepared to pass the National Registry of Emergency Medical Technicians Cognitive Examination and Psychomotor Examination(s).
- Graduates will be eligible to seek employment or volunteer opportunities in advanced emergency care in a variety of contexts.
- Graduates will be able to conduct excellent medical and trauma assessment and manage appropriate patient-care interventions for patients of various ages.
- Graduates will be able to provide professional and compassionate care in a diverse and multicultural society and as a part of a team of healthcare providers.
- Graduates will be prepared to evaluate their own ethical boundaries and create for themselves strategies for self-directed and life-long learning.

This course includes a minimum of 1950 contact hours. The MAXIMUM INSTRUCTIONAL DEADLINE (MID) for this course is 70 weeks. The student will have roughly 16 months from the cohort start date to complete all courses in the EMT-P program except EMSP-2165 and EMSP-2166 and take their first attempt at the FISDAP Comprehensive Readiness Exam. The MAXIMUM COURSE DURATION (MCD) is 78 weeks. This provides students eight (8) weeks beyond the Instructional Period to participate in a Test Preparation period in which they will be allowed to continue their studies to ensure their readiness to schedule their exam with the National Registry of Emergency Medical Technicians while completing EMSP-2165 Capstone Field Internship. Students who remain in the course after the Instructional Period but prior to the end of the Maximum Course Duration may be assigned additional mandatory activities necessary for course completion. While Axon Education courses each have a Maximum Instructional Period and a Maximum Course Duration, the courses employ adaptive learning technologies and are, therefore, highly personalized for each student. Students may complete the course as rapidly as they are able to meet all requirements. Because this course is based upon a Flexible Time Schedule, it is possible that a student may be assigned a failing grade for the course prior to the end of the Instructional Period or the deadline for the Maximum Course Duration. Causes for course failure include but are not limited to violations of the Minimum Activity Policy, positive results on the required drug screening, failure to meet compliance deadlines for documentation related to admission requirements, dismissal, and other items articulated in the course syllabus.

# Grading

This course is offered to fulfill the requirements of an EMTB Certification course. A final grade will be issued for the course after completion. There are two crucial characteristics of course grades that the student needs to consider:





- 1. While grades for individual courses may be used to identify areas of competency for the Axon program, these grades will not be articulated to Axon Education partners for inclusion in degree programs unless the student successfully completes the entire program and becomes eligible to participate in the National Registry of Emergency Medical Technicians Psychomotor Examinations and Cognitive Examination. Students may not expect articulation of individual course credits in absence of success in the entire certification program.
- 2. There are programmatic Critical Criteria discussed elsewhere in this document that, if unmet, could result in the issuance of a failing final grade for the program, regardless of the student's success or performance in other aspects of the program. Failure to meet these Critical Criteria for the entire program could effectively negate articulated credit for any course included in the program to other institutions.

This course is competency-based overall, which allows students to improve their performance in most areas. Generally, students are allowed and encouraged to attempt completion of assignments as many times as necessary to achieve a satisfactory grade or as often as desired to improve a grade or enhance competency. In most cases, assignments are considered "open book," which means that the student is encouraged to use all tools at their disposal to demonstrate success for the task at hand. In certain limited cases, assignments or examinations may be proctored and may include specific limitations on the environment in which the activity is completed, or limitations on the tools or resources that may be used as a part of the effort.

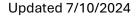
# **Affective Grade**

The Axon Education Latin Motto is *"Primum Respectum Date"* (PREE-mum res-PECT-um DAHtay), which means "first give respect." In other words, Axon is encouraging its students to offer respect to others, even before they earn it. When students choose to show respect to everyone they come in contact with, they will cause others to respect them and create an atmosphere that is less likely to be clouded with bigotry, racism, and inappropriate judgment. Each student should carefully read Critical Criterion #4 – Positive Affect Criterion below. While a student's affect may not directly impact an assignment of a particular numeric or letter grade, inappropriate affect in all educational situations related to the completion of this course has the potential to cause a student to be assigned a failing grade.

# **Proctored Assignments**

Certain assignments or evaluations must be proctored. Instructions for proctored activities will be included at the time the assignment is given and may include the use of third-party organizations which provide student-proctoring. In such a case, the student will be responsible for paying for the proctoring session. The Axon Teaching Team may, at their sole discretion, require that an assignment for a particular student be proctored even if proctoring is not required for the same or similar assignment of all other students.

### **Standardized Examinations**





Examinations may be conducted using nationally standardized instruments developed and administered by third parties. In these cases, proctoring will be employed, and students may be explicitly restricted in the environment in which the exam will be conducted. Unless otherwise indicated, Axon will allow students one attempt at the nationally standardized examinations without additional costs to students on the first attempt. They will also be required to show satisfactory progress within this product. The student will have three additional attempts at no cost to the student after they have purchased the study tools. Students who are in need of additional attempts beyond the initial four attempts for any reason will be required to pay an additional nominal fee for each pair of attempts.

# **Final Exam**

This course will include a final examination. The exam may or may not require proctoring, and specific requirements will be provided in the Learning Management System. The Teaching Team has the authority to require proctoring on any assignment including final examinations. Where appropriate, final examinations may be conducted using nationally standardized exams. These exams have been administered to thousands of students each year and may provide a more rigorous experience as well as results that are highly predictive of student success. "Cut Scores" are often assigned for final examinations that dictate the minimum score a student must achieve to successfully complete the course or program.

### Additional Admission Requirements for Paramedic Program

Candidates for EMT-P Must Have EMT-Basic or Advanced EMT Certification.

# **Paramedic Program – Course Sequence & Course Descriptions**

# **BIOL 2401: Anatomy and Physiology**

Anatomy and Physiology provides an overview of anatomy and physiology appropriate for individuals entering an allied medical field of study. This course gives students the knowledge needed to conduct emergency medical assessments of illnesses and injuries. Topics include medical terminology, anatomy, physiology, pathophysiology, and life-span development. *Prerequisites:* Program Admission, including an existing EMTB certification or greater

# EMSP 1310: Introduction to Advanced Practice and Public Health

Introduction to Advanced Practice and Public Health provides a review of foundational Emergency Medical Service concepts to ensure that entering EMTs have an adequate historical, legal, and conceptual foundation to allow them to differentiate between basic and advanced practice. The course provides students an opportunity to evaluate their previous role in EMS in





the context of the increased demands of advanced practice in terms of legal and ethical boundaries, scope of practice, and leadership requirements. The student is encouraged to examine their own goals for personal growth and psychological health in the context of advanced practice. *Prerequisites:* BIOL 2401 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

# EMSP 1320: Patient Assessment and Airway Management

Patient Assessment and Airway Management will guide the student through the development of critical thinking skills related to the practice of essential and standardized medical and trauma assessment techniques in an ALS prehospital environment. The course emphasizes airway management, advanced clinical decision-making, identification and treatment of life threats, and advanced assessment techniques. *Prerequisites:* BIOL 2401, EMSP 1310 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

# EMSP 2355: Clinical & Field Portfolio (EMSP 1325, EMSP 1145, EMSP 2125 for AEMT students)

*Clinical & Field Portfolio* serves to place Paramedic students into approved clinical and field environments in which they may complete required medical and field experiences related to both medical and trauma cases. This course is designed to assist the student in completing the Paramedic Portfolio in preparation for approval to enroll in EMSP 2250 Capstone Field Internship. Each student is required to document in an electronic portfolio a specific number of successful demonstrations of skills or competencies. While some of these demonstrations may be accomplished in a lab setting, many require successful demonstration of the skill during a live-patient encounter, which may only be fulfilled during a clinical/field experience. It is impossible to predict the frequency or mix of live-patient encounters that may occur during a given clinical/field experience. As a result, it is impossible to specify in advance the number of hours that may be required to complete the Paramedic Portfolio. The requirements for the course presume a nominal face-to-face involvement of at least 144 hours for Paramedics and 96 hours for AEMT. EMSP 2325 is functionally equivalent to the combination of EMSP 1125: Clinical Experience 1, EMSP 1145: Clinical Experience 2, and EMSP 2125 Clinical Experience 3. Students exiting after AEMT certification will be issued credit for EMSP 1125 & EMSP 1145, while students in the Paramedic Program will be issued credit for EMSP 2325. Prerequisite: BIOL 2401, EMSP 1310, EMSP 1320 – May be concurrent with non-prerequisite courses.

# EMSP 1330: Pharmacology

*Pharmacology* provides a base-level understanding of the chemistry, classification, and regulation of pharmaceuticals. Special emphasis is given to the identification and use of medications used in the prehospital setting. Students study the impact of pharmaceuticals on medical and trauma assessment and the clinical decision-making process. The role of medical





direction is discussed, as well as the optimal use of medication and the identification of adverse reactions to medications and contraindications. *Prerequisites:* BIOL 2401, EMSP 1310, EMSP 1320. This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

# EMSP 1340: Trauma Management and Life Support

*Trauma Management and Life Support* provides the student with an opportunity to apply ALS assessment and treatment requirements to the management of both simple and complex trauma emergencies. The course emphasizes the understanding of the mechanism of injury, bleeding, soft tissue trauma, burns, face and neck trauma, head and spine trauma, chest trauma, abdominal and genitourinary trauma, orthopedic trauma, and environmental emergencies. *Prerequisites:* BIOL 2401, EMSP 1310, EMSP 1320, EMSP 1330 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

# **EMSP 1350: Special Populations**

*Special Populations* addresses the special medical and trauma assessment techniques needed to best serve pediatric, geriatric, obstetric, and special-needs patients. The course emphasizes physiological differentiation and appropriate treatment strategies. *Prerequisites:* BIOL 2401, EMSP 1310, EMSP 1320, EMSP 1330, EMSP 1340 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

# **EMSP 2410: Medical Emergencies**

*Medical Emergencies* provides a student with an overview of various medical emergencies. The student will be expected to apply ALS assessment and treatment techniques to the management of both simple and complex medical emergencies. Topics include respiratory emergencies, cardiovascular emergencies, neurological emergencies, diseases of the eyes, ears, nose, and throat, abdominal and gastrointestinal, genitourinary and renal emergencies, gynecologic emergencies, endocrine emergencies, hematologic emergencies, immunologic emergencies, infectious diseases, and toxicology. *Prerequisites:* BIOL 2401, EMSP 1310, EMSP 1320, EMSP 1330, EMSP 1350 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management which includes lab exercises which may be pertinent to this class.

# EMSP 2420: Cardiology

*Cardiology* is a deep introduction to prehospital cardiac assessment and treatment for ALS providers. Topics include cardiac anatomy and basic physiology, electrophysiology, calculating rates, vectors and the basic beat, 12-lead ECGs, electrocardiography and arrhythmia recognition, rhythm strip interpretation, normal sinus rhythm, sinus bradycardia, sinus





tachycardia, sinus arrhythmia, sinus blocks, etc. Emphasis is given to the accurate identification of arrhythmia in a broad variety of contexts. *Prerequisites:* BIOL 2401, EMSP 1310, EMSP 1320, EMSP 1330, EMSP 1340, EMSP 1350, EMSP 2410 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management, which includes lab exercises that may be pertinent to this class.

# **EMSP 2330: EMS Operations**

This course will serve as a review of the operations side of Emergency Medical Services that the student would have gained at the EMT provider level. Emphasis will include ALS leadership for operational decision-making. Topics include transport operations, incident management and mass-casualty incidents, vehicle extrication and special rescue, hazardous materials, terrorism response, disaster response, and crime-scene awareness. *Prerequisites:* BIOL 2401, EMSP 1310, EMSP 1320, EMSP 1330, EMSP 1340, EMSP 1350, EMSP 2410, EMSP 2420 - This course requires concurrent continuous enrollment with EMSP 2140 Assessment Based Management which includes lab exercises which may be pertinent to this class.

# EMSP 2140: Assessment Based Management

The course is designed to allow the student to demonstrate competency through high-fidelity simulations. Students will maintain enrollment in this course for the duration of the program and may, therefore, be concurrently enrolled in this course and others prior to enrollment in EMSP 2250 Capstone Field Experience. Students will engage in increasingly complex scenarios that require them to demonstrate the comprehension of course material, psychomotor skills, and behavior required to manage a successful patient encounter. *Prerequisites:* BIOL 2401, EMSP 1310, EMSP 1320, EMSP 1330, EMSP 1340, EMSP 1350, EMSP 2410, EMSP 2420 – May be concurrent with non-prerequisite courses.

# EMSP 2145: Career Lab

*Career Lab* provides the student with intensive study opportunities to prepare for and complete the Paramedic Program Readiness Exam, which subsequently prepares the student for the National Registry of Emergency Medical Technicians Paramedic Cognitive Examination. Additionally, students are required to achieve the American Heart Association - Advanced Cardiovascular Life Support card and the American Heart Association - Pediatric Advance Life Support card. Students will attempt the Paramedic Program Readiness Exam multiple times. Remedial exercises may be assigned based on student performance. *Prerequisites:* Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher. *Corequisites:* Concurrent Enrollment in EMSP - 2250. *Note:* Portions of the requirements for this course (ACLS & PALS) may be completed through third-party American Heart Association providers at the student's expense.

# EMSP 2250: Capstone Field Internship



The *Capstone Field Internship* will serve to allow the student/paramedic candidate to operate in the role of lead paramedic on a working ambulance operating in a 911/emergency setting. Students will continue to demonstrate and document competencies which include skills performed or interpreted across a variety of patient ages, differential diagnoses, or complaints, but as a part of the Capstone Field Internship will focus on completing and documenting a specific number of team leads representing a variety of skills. It is impossible to predict the frequency or mix of live-patient encounters that may occur during a given field internship experience. As a result, it is impossible to specify in advance the number of hours which may be required to complete the Capstone Field Internship. The requirements for the course presume a nominal face-to-face involvement of at least 120 hours. Students are responsible for scheduling and completing a sufficient number of field internship hours necessary to obtain the minimum number of 120 hours and 20 team leads that are transported to the emergency department.

The Paramedic candidate can only count team leads for our program that are initiated through the 911 system, or as an emergency transfer for higher level of care from a facility to an emergency department.

### Definitions

- **911/Emergency Setting:** Any emergency response that is initiated by a call to the emergency dispatch center. They may also include transfers from stand-alone emergency departments, nursing homes, assisted living facilities, or urgent care clinics; so long as the patient is being transported to a higher level of care. These do not include interfacility transfers where the end destination is not an emergency department, unless transport is from a lower level of care to a higher level of care.
- **Facility:** Any health care facility that provides long-term care, specialized nursing services, acute urgent care, primary care, or radiological services.
- **Emergency Department:** Department or room within a hospital as determined by federal or state law for the provision of emergency health care services. This does not include freestanding emergency medical care facilities.

*Prerequisites and Corequisites:* Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher. *Prerequisite:* BIOL 2401; EMSP 1310; EMSP 1320; EMSP 1330; EMSP 1340; EMSP 1350; EMSP 2410; EMSP 2420; EMSP 2330; EMSP 2140.



# EMTB Syllabus

7/11/24, 3:48 PM

Syllabus for 11\_EMTB Development Course

Texas EMS School -

EMT Course Syllabus



# EMSP 1501 | EMT Education: Introduction to Emergency Medical Services

### EMT Program Goal

The purpose of the Emergency Medical Technician course is to prepare EMTs who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

# EMT Student Learning Outcomes.

- Graduates will be prepared to pass the National Registry of Emergency Medical Technicians Cognitive Examination and Psychomotor Examination(s).
- Graduates will be eligible to seek employment or volunteer opportunities in basic emergency care in a variety of contexts.
- Graduates will be able to conduct excellent medical and trauma assessments and manage appropriate patient-care interventions for patients of various ages.
- Graduates will be able to provide professional and compassionate care in a diverse and multicultural society and as a part of a team of healthcare providers.
- Graduates will be prepared to evaluate their own ethical boundaries and create for themselves strategies for self-directed, and life-long learning.

EMT Catalog Description | EMSP 1501

https://axoneducation.instructure.com/courses/280/assignments/syllabus

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- Graduates will be able to provide professional and compassionate care in a diverse and multicultural society and as a part of a team of healthcare providers.
- Graduates will be able to provide professional and compassionate care in a diverse and multicultural society and as a part of a team of healthcare providers.
- Graduates will be prepared to evaluate their own ethical boundaries and create for themselves strategies for self-directed and life-long learning.

Paramedic Program Courses

The Paramedic Program consists of the following courses:

- EMSP 1310 | Introduction to Advanced Practice and Public Health
- EMSP 2355 | Clinical and Field Portfolio
- BIOL 2401 | Anatomy and Physiology
- EMSP 1320 | Patient Assessment Airway Management
- EMSP 1330 | Pharmacology
- EMSP 2420 | Cardiology
- EMSP 1340 | Trauma Management and Life Support
- EMSP 1350 | Special Populations
- EMSP 2410 | Medical Emergencies
- EMSP 2330 | EMS Operations
- EMSP 2140 | Assessment Based Management
- EMSP 2145 | Career Lab
- EMSP 2250 | Capstone Field Internship

Course information is listed below and the module information is in the section, Program/Course Outline.

### EMSP 1310 | Introduction to Advanced Practice and Public Health

Introduction to Advanced Practice and Public Health provides a review of foundational Emergency Medical Service concepts to ensure that entering EMTs have an adequate historical, legal, and conceptual foundation to allow them to differentiate between basic and advanced practice. The course provides students an opportunity to evaluate their previous role in EMS in the context of the increased demands of advanced practice in terms of legal and ethical boundaries, scope of practice, and leadership requirements. The student is encouraged to examine their own goals for personal growth and psychological health in the context of advanced practice.

#### Prerequisites and Corequisites

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EMT Required Course Materials | Software

Access to electronic patient recording software (provided by enrollment) Access to Canvas Learning Management System (LMS) [provided by enrollment].

# EMT Grade Calculation

The program-wide Grading Policy and the institution's Grading Scale are included in the EMTB Course Common Syllabus Elements below. Students are encouraged to read these items carefully. They should be aware that there are program-wide pass-fail elements referred to as Critical Criteria that, if breached, may cause a student to be issued a failing grade for the entire program.

Description	Percentage
Examinations Final Exams	40%
Homework	
Chapter Objectives Review	
Chapter Reading Assignments	
Test Taking Strategies	30%
EMTalk Episodes	
Interactive Lectures	
Additional Assignments	
Quizzes	
Chapter Quizzes	30%
Test Prep	
Affect	- 1
Skills Lab Readiness Exam	Pass/Fail
Clinical/Field Experiences	

Grades for this individual course will be calculated as follows:

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Total Credit	3
Lab	0
Clinical Experience	1.5
Field Experience	1.5
Capstone Internship	o

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# BIOL 2401 | Anatomy and Physiology

Anatomy and Physiology provides an overview of anatomy and physiology appropriate for individuals entering an allied-medical field of study. This course gives students the knowledge needed to conduct emergency medical assessments of illnesses and injuries. Topics include medical terminology, anatomy, physiology, pathophysiology, and life-span development.

#### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

**NOTE:** If you have submitted proof of completion of a similar or higher-level Anatomy and Physiology Course which you received credit for, you may not be required to complete this course. Please check with the School to ensure you are completing what is required.

Prerequisite: EMSP 1310

Corequisite: None

Credit

Total Credit	4
Lecture	3
Lab	1
Clinical Experience	0
Field Experience	0
Capstone Internship	0

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prescribed assignments within each chapter are to be completed.

- f Helpful Student Resources (https://axoneducation.instructure.com/courses/280/modules/8804)
- I Get Started HERE! (https://axoneducation.instructure.com/courses/280/modules/8805)
- Introduction Module (https://axoneducation.instructure.com/courses/280/modules/8806)
- từ <u>eBook: Emergency Care and Transportation of the Sick and Injured 12th Edition</u> (<u>https://axoneducation.instructure.com/courses/280/modules/8807</u>)
- EMTB11 | EMSP 1501 | Syllabus (https://axoneducation.instructure.com/courses/280/modules/8859)
- ☆ Module 1 | Medical Terminology | Chapter 5 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8808)
- từ Module 2 | The Human Body | Chapter 6 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8809)
- ☆ Module 3 | Patient Assessment | Chapter 10 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8811)
- ☆ Module 4 | Medical Overview | Chapter 15 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8812)
- to <u>Module 4A | Compliance Module | Complete if you intend to fully enroll</u> (<u>https://axoneducation.instructure.com/courses/280/modules/8813)</u>
- ☆ Module 5 | Trauma Overview | Chapter 25 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8814)
- ☆ Module 6 | EMS Systems | Chapter 1 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8815)
- ★ Module 7 | Workforce Safety and Wellness | Chapter 2 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8816)
- từ Module 8 | Medical, Legal, and Ethical Issues | Chapter 3 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8817)
- t Module 9 | Skills Lab Prep Module- All Elements Required | Complete Before Attending Skills Lab | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8818)
- ☆ Module 10 | Communications and Documentation | Chapter 4 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8819)
- ☆ Module 11 | Clinical Information Module | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8820)
- ★ Module 12 | HIPAA Compliance in Pre-Hospital Care | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8821)

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- ★ Module 13 | Life Span Development | Chapter 7 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8822)
- Image: Module 14 | Lifting and Moving Patients | Chapter 8 | EMSP 1501

   (https://axoneducation.instructure.com/courses/280/modules/8823)
- Module 15 | The Team Approach to Health Care | Chapter 9 | EMSP 1501

   (https://axoneducation.instructure.com/courses/280/modules/8824)
- từ Module 16 | Airway Management | Chapter 11 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8825)
- t Module 17 | Principles of Pharmacology | Chapter 12 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8826)
- t Module 18 | Shock | Chapter 13 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8827)
- từ Module 19 | BLS Resuscitation | Chapter 14 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8828)
- từ Module 20 | Respiratory Emergencies | Chapter 16 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8829)
- Module 21 | Cardiovascular Emergencies | Chapter 17 | EMSP 1501

   (https://axoneducation.instructure.com/courses/280/modules/8830)
- từ Module 22 | Neurologic Emergencies | Chapter 18 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8831)
- Module 23 | Gastrointestinal and Urologic Emergencies | Chapter 19 | EMSP 1501

   (https://axoneducation.instructure.com/courses/280/modules/8832)
- <u>Module 24 | Endocrine and Hematologic Emergencies | Chapter 20 | EMSP 1501</u>
   (<u>https://axoneducation.instructure.com/courses/280/modules/8833</u>)
- t Module 25 | Allergy and Anaphylaxis | Chapter 21 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8834)
- từ Module 26 | Toxicology | Chapter 22 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8835)
- ☆ Module 27 | Behavioral Health Emergencies | Chapter 23 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8836)
- từ Module 28 | Gynecologic Emergencies | Chapter 24 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8837)
- ★ Module 29 | Bleeding | Chapter 26 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8838)

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- từ Module 30 | Soft-Tissue Injuries | Chapter 27 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8839)
- to <u>Module 31 | Face and Neck Injuries | Chapter 28 | EMSP 1501</u> (<u>https://axoneducation.instructure.com/courses/280/modules/8840</u>)
- Module 32 | Head and Spine Injuries | Chapter 29 | EMSP 1501

   (https://axoneducation.instructure.com/courses/280/modules/8841)
- t <u>Module 33 | Chest Injuries | Chapter 30 | EMSP 1501</u> (<u>https://axoneducation.instructure.com/courses/280/modules/8842</u>)
- Module 34 | Abdominal and Genitourinary Injuries | Chapter 31 | EMSP 1501

   (https://axoneducation.instructure.com/courses/280/modules/8843)
- Module 35 | Orthopaedic Injuries | Chapter 32 | EMSP 1501
   (https://axoneducation.instructure.com/courses/280/modules/8844)
- t≊ Module 36 | Environmental Emergencies | Chapter 33 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8845)
- Module 37 | Obstetrics and Neonatal Care | Chapter 34 | EMSP 1501
   (https://axoneducation.instructure.com/courses/280/modules/8846)
- t Module 38 | Pediatric Emergencies | Chapter 35 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8847)
- từ Module 39 | Geriatric Emergencies | Chapter 36 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8848)
- ☆ Module 40 | Patients With Special Challenges | Chapter 37 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8849)
- ☆ Module 41 | Transport Operations | Chapter 38 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8850)
- Module 42 | Vehicle Extrication and Special Rescue | Chapter 39 | EMSP 1501

   (https://axoneducation.instructure.com/courses/280/modules/8851)
- từ Module 43 | EMT Jurisprudence Course | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8852)
- ☆ Module 44 | Incident Management | Chapter 40 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8853)
- ★ Module 45 | Terrorism Response and Disaster Management | Chapter 41 | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/8854)
- từ Module 46 | EMT Readiness Exam on FISDAP | EMSP 1501 (https://axoneducation.instructure.com/courses/280/modules/17793)

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- <u>Module 47 | You have Completed Your Course Work!!!</u>
   (<u>https://axoneducation.instructure.com/courses/280/modules/8856</u>)</u>
- 날 Soft-Skill Simulations (https://axoneducation.instructure.com/courses/280/modules/8857)
- ☆ TestPrep (https://axoneducation.instructure.com/courses/280/modules/8858)
- 1 Helpful Student Resources (https://axoneducation.instructure.com/courses/280/modules/8804)
- 望 Get Started HERE! (https://axoneducation.instructure.com/courses/280/modules/8805)

# Grading Scale

The program-wide Grading Policy and the institution's Grading Scale are included in the EMTB Course Common Syllabus Elements below. Students are encouraged to read these items carefully and should be aware that there are program-wide pass-fail elements referred to as Critical Criteria that, if breached, may cause a student to be issued a failing grade for the entire program.

When numeric grades or letter grades are required, the institution uses the following scale:

Letter Grade	Numeric Grade	Grade Points
A+	100% or more	4.33/4.00
A	93% - 99%	4.00/4.00
A-	90% - 92%	3.67/4.00
B+	87% - 89%	3.33/4.00
В	83% - 86%	3.00/4.00
В-	80% - 82%	2.67/4.00
C+	77% - 79%	2.33/4.00
С	73% - 76%	2.00/4.00
C-	70% - 72%	1.67/4.00
D+	67% - 69%	1.33/4.00
D	63% - 66%	1.00/4.00
D-	60% - 62%	0.67/4.00
F	0% - 59%	0.00/4.00

EMT Maximum Instructional Deadline (MID)

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#### Maximum Instructional Deadline (MID)

The Maximum Instructional Deadline for this course is 20 weeks. Students will have 20 weeks from the cohort start date to complete all online assignments and complete at least one attempt at the Field Internship Student Data Acquisition Project (FISDAP) Comprehensive Readiness Exam.

Students must schedule their Readiness Exam prior to 30 days before their MID. Furthermore, Students must complete an initial attempt at the Readiness Exam prior to their MID.

#### EMT Maximum Course Duration

#### **Maximum Course Duration**

The Maximum Course Duration for this course is 26 weeks. The MCD may be extended at the sole discretion of the Teaching Team. The decision will be based on the student's demonstration of overall course progress, furloughs awarded due to special life circumstances, scheduled holidays, etc. Students wishing to seek an extension of the Maximum Course Duration should formally request an extension by submitting a FLEX Request through the link on the Student Resources Page. Extensions will only be considered if requested in advance of the MCD deadline. Students who remain in the course after the Maximum Instructional Deadline but prior to the end of the Maximum Course Duration may be assigned additional mandatory activities necessary for course completion. While Axon courses each have a Maximum Course Duration, the courses employ adaptive learning technologies and are, therefore, highly personalized for each student. Students may complete the course as rapidly as they are able to meet all requirements. Because this course is based upon a Flexible Time Schedule, it is possible that a student may be assigned a failing grade for the course prior to the end of the Maximum Instructional Deadline or the deadline for the Maximum Course Duration. Causes for course failure include but are not limited to violations of the Minimum Activity Policy, positive results on the required drug- screening, failure to meet compliance deadlines for documentation related to enrollment requirements, dismissal, or other reasons articulated in the course syllabus.

#### EMT Attendance Policy

This course is competency-based and is presented in an online format. There are no mandatory weekly sessions. Instead, students may move through the curriculum as quickly as they are able within a set of parameters (See Maximum Course Duration). There are mandatory face-to-face sessions or electronic meetings that must be attended; however, most of these sessions will be scheduled by the student. Attendance at skills labs, clinical experiences, field experiences, and scheduled tutoring sessions will be tracked, and students failing to appear or who arrive late for participation will be required to make up all sessions or missed content.

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#### EMT Attendance Policy Specific to Skills Labs

Students are required to attend at least one face-to-face Immersive Skills Lab, which generally lasts two days. During these labs, students learn and practice hands-on skills and ultimately prepare for the NREMT Psychomotor Examination. Students may be required to attend an additional Skills Lab if they have not demonstrated competency in the clinical/field setting. Skills Labs are conducted regularly at the Abilene and Houston class locations. Students must schedule their Skills Lab within 60 days of their official cohort start date. Students are encouraged to sign up for the Skills Lab as early in the course as possible to ensure that they are able to attend a session that is convenient to them in terms of timing. Finally, students are also encouraged to get away from routine responsibilities such as other schooling, work, family obligations, etc., during Skills Labs due to the need to focus intently on the lab instruction. Students may register online by visiting https://www.axoneducation.com/skills/. Students should also arrange for travel and sleeping accommodations as soon as possible after they have registered for their desired session date.

EMT Attendance Policy Specific to Clinical/Field Experiences

Students must initiate the scheduling of their clinics within 30 days of the completion of their final Skills Lab. Late arrival to, or failure to attend, a scheduled clinical experience or field experience without notifying Axon in advance will be treated as unprofessional behavior and may result in a breach of Critical Criterion #4 – Positive Affect (see below), and it could result in the student failing the course. It is understood that in rare cases, emergencies happen that could prevent a student from notifying Axon of the late arrival or cancellation in advance, but prenotification of late arrival or cancellation is expected in all cases. All missed clinical experiences, or field experiences, must be made up. The Teaching Team may also assign remedial work or additional shifts in cases where shifts or portions of shifts were missed.

# Documenting Field, Lab, and Clinical Experiences

The institution mandates that every student who attends a clinical or field experience write a patient care report, herein referred to as a PCR, for each patient they come into contact with. Each PCR must include completion of the required checkboxes and form selections, as well as a comprehensive narrative in CHART format, as described in the course content.

Towards the end of each clinical and field experience, the student must prompt their preceptor to complete the end-of-shift evaluation requirements, as described in course content, and a preceptor sign-off before leaving the facility on that date. Failure to do so will require the student to complete another clinical/field experience to replace that shift date. The institution will not reach out to the site on the student's behalf to obtain those documents after the fact. **The student is prohibited** 

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from reaching out to the site on their own, as doing so would put the student at risk for administrative removal from the program.

The institution recognizes that students may not be able to write detailed PCRs while on their clinical or field experience due to reasons including, but not limited to a busy shift. <u>That being</u> said, students will have up to 48 hours from shift end time to write their PCRs for that date and complete the required evaluations for which they are responsible.

### Grading

This course is offered to fulfill the course requirements of an EMTB Certification. A final grade will be issued for the course after completion. There are two crucial characteristics of course grades that the student needs to consider:

 While grades for individual courses may be used to identify areas of competency for the Axon program, these grades will not be articulated to Axon Education partners for inclusion in degree programs unless the student successfully completes the entire program and becomes eligible to participate in the National Registry of Emergency Medical Technicians Psychomotor Examinations and Cognitive Examination. Students may not expect articulation of individual course credits in the absence of success in the entire certification program.
 There are programmatic Critical Criteria discussed elsewhere in this document that, if unmet, could result in the issuance of a failing final grade for the program, regardless of the student's success or performance in other aspects of the program. Failure to meet these Critical Criteria for the entire program could effectively negate articulated credit for any course included in the program to other institutions.

This course is competency-based overall, which allows students to improve their performance in most areas. Generally, students are allowed and encouraged to attempt completion of assignments as many times as necessary to achieve a satisfactory grade or as often as desired to improve a grade or enhance competency. In most cases, assignments are considered "open-book," which means that the student is encouraged to use all tools at their disposal to demonstrate success in the task at hand. In certain limited cases, assignments or examinations may be proctored and may include specific limitations on the environment in which the activity is completed or limitations on the tools or resources that may be used as a part of the effort.

#### Clinical Sites

Students often already work with clinical providers or have relationships with personnel in local emergency rooms or ambulance services and wish to complete their field experiences at these locations. Axon is willing and interested in forming a relationship with any qualified clinical provider. However, in order for a clinical site or field site to be used, the organization must have signed an Affiliation Agreement with Axon. Many organizations are willing to complete the agreement if they have local students who are requesting it. However, it often takes several weeks for an

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#### Syllabus for 11\_EMTB Development Course

organization to review and sign official documents, so if you are interested in helping arrange such a relationship, you should start the process as early as possible to avoid causing delays. Contact support@axoneducation.com to request that a site be considered. You then need to work with Student Support staff to facilitate the dialogue with the potential provider. You will only be able to utilize the facility if a signed agreement is in place.

# Re Proctored Assignments

Certain assignments or evaluations must be proctored. Instructions for proctored activities will be included at the time the assignment is given and may include the use of third-party organizations that provide student proctoring. In such a case, the student will be responsible for paying for the proctoring session. The Axon Teaching Team may, at their sole discretion, require that an assignment for a particular student be proctored, even if proctoring is not required for the same or similar assignment for all other students.

### Standardized Examinations

Examinations may be conducted using nationally standardized instruments developed and administered by third parties. In these cases, proctoring will be employed, and students may be explicitly restricted in the environment in which the exam will be conducted. Unless otherwise indicated, Axon will allow students one attempt at the nationally standardized examinations without additional costs to students on the first attempt. They will also be required to show satisfactory progress within this product. The student will have three additional attempts at no cost to the student after they have purchased the study tools. Students who are in need of additional attempts beyond the initial four attempts for any reason will be required to pay an additional nominal fee for each pair of attempts.

### Affective Grade

The Axon Education Latin Motto is "Primum Respectum Date" (PREE-mum res-PECT-um DAHtay), which means "first give respect." In other words, Axon is encouraging its students to offer respect to others, even before they earn it. When students choose to show respect to everyone they come in contact with, they will cause others to respect them and create an atmosphere that is less likely to be clouded with bigotry, racism, and inappropriate judgment. Each student should carefully read Critical Criterion #4 – Positive Affect Criterion below. While a student's affect may not directly impact an assignment of a particular numeric or letter grade, inappropriate affect in all educational situations related to the completion of this course has the potential to cause a student to be assigned a failing grade.

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### Program Critical Criteria

This course contains several Critical Criteria that, if unmet, could result in the issuance of a failing final grade for the course, regardless of the student's success or performance in other aspects of the course.

#### Critical Criterion #1 - Compliance Deadline Criterion

Students must submit all necessary compliance documentation by the Compliance Date, which is 30 days from the date of their enrollment.

#### Critical Criterion #2 - Minimum Activity Criterion

During the Instructional Period (first 20 weeks or as individually assigned by the Teaching Team), students must log in and complete at least one assignment each week; note that this will not allow a student to finish in the expected timeline. Minimum activity is evaluated each Monday for the preceding seven days (Monday through Sunday). Students attending a Skills Lab or participating in a Clinical Experience or Field Experience may request an exemption for the actual week in which the student was involved in the face-to-face activity.

#### Critical Criterion #3 – Student Responsiveness Criterion

The Teaching Team may establish that an individual has failed to achieve the Student Responsiveness Criterion by evaluating their pattern of communication. Students are expected to adequately respond to institutional inquiries in a timely manner. A student's adequate and timely responses to written inquiries, text messages, voicemails, and other means of communication from institutional representatives are considered mandatory elements of course progress, even when such inquiries are not directly related to academic performance.

#### Critical Criterion #4 – Positive Affect Criterion

The Teaching Team may establish that an individual has failed to achieve the Positive Affect Criterion if a student exhibits ongoing or acutely disruptive affect or unprofessional behavior to fellow students, institutional personnel, clinical partner personnel, or other stakeholders. Satisfactory student progress in this regard is established, among other means, by demonstrating a willingness to work as a productive team member with other students, and especially with clinical partners. This includes dressing, speaking, and acting professionally while in school contexts.

# A Note to Our Students

We care about your success! If you need help in the course or the program, please reach out to us by email or phone so that we can understand your need and help you. If you need to schedule time for tutoring or emotional support, please do not hesitate to schedule an appointment.

ADA Statement

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**Axon** Education

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#### Syllabus for 11\_EMTB Development Course

At times, it may be necessary for students with special needs or disabilities to receive special or reasonable accommodation. Axon Education will make reasonable accommodations to meet the needs of students with disabilities. To request an accommodation, students should contact Student Support at <a href="mailto:support@axoneducation.com">support@axoneducation.com</a> (mailto:Mail%20to:%20support@axoneducation.com).

#### Syllabus Affirmation Requirement

Each student will be required to acknowledge his or her receipt and understanding of this entire syllabus in an assignment in the Canvas Learning Management System.

## E Furloughs

Students experiencing exceptional life circumstances who wish to complete the course, but require an extended break from course activity, may request a furlough. A student may request a FURLOUGH in order to avoid failing out of the course due to multiple consecutive MAP violations. You may request a furlough by going to <u>www.axoneducation.com/student-resources</u> (<u>https://www.axoneducation.com/student-resources</u>) and filling out the appropriate form. The Teaching Team will determine if the request is approved and for how long. Furloughs must be requested in advance but if approved may include up to seven days prior to the request.

#### EP Breaks

Students can request a break by submitting a Flex Request on the student resource page: <a href="https://www.axoneducation.com/student-resources">www.axoneducation.com/student-resources</a> (<a href="https://www.axoneducation.com/student-resources">https://www.axoneducation.com/student-resources</a> (<a href="https://www.axoneducation.com/student-resources">www.axoneducation.com/student-resources</a> (<a href="https://www.axoneducation.com/student-resources">https://www.axoneducation.com/student-resources</a> (<a href="https://www.axoneducation.com/student-resources">https://www.axoneducation.com/student-resources</a> (<a href="https://www.axoneducation.com/student-resources">https://wwww.axoneducation.co

#### Exit Plan

Once the student has completed the majority of the online coursework, the teaching team will move the student to an exit plan. While it is the student's responsibility to manage the completion of all course requirements prior to the Maximum Course Duration date, during the Exit Plan phase of the course the Teaching Team may assign deadlines to students to complete various course requirements, including attempts at the Readiness Exam, completion of Clinical Experiences, completion of Field Experiences, remediation exercises, attempts at practice exams, etc. Momentum Scores are not calculated and MAP notices are not issued during the Exit Plan phase of the course.

### IHI Momentum Score

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#### Syllabus for 11\_EMTB Development Course

During the Instructional Period, Momentum Scores are calculated and distributed to students on a routine basis. Momentum Scores are expressed as a percentage, and students are awarded badges at various times during the instructional period if they have achieved a Momentum Score above 100%. The Momentum Score is not intended to predict overall student success, nor is it explicitly used in the assignment of any course grade. Momentum Scores are intended to encourage self-evaluation and self- regulation as it relates to your course activity. You are encouraged to monitor your Momentum Score as a means to evaluate your own progress, adjust your activity based upon your own appreciation of your progress, and seek help if you deem it necessary.

# o Badges

Students experiencing exceptional life circumstances who wish to complete the course but require an extended break from course activity may request a furlough. A student may request a FURLOUGH in order to avoid failing out of the course due to multiple consecutive MAP violations. You may request a furlough by going to www.axoneducation.com/student-resources and filling out the appropriate form. The Teaching Team will determine if the request is approved and for how long. Furloughs must be requested in advance but, if approved, may include up to seven days prior to the request.

#### & Labs

<u>Lab Assignments (Labs)</u> – Labs are defined as any activity or activities that require you to participate in a face-to-face session with an instructor, preceptor or peer, or may include the completion of specific online lessons, scenarios or workbooks. Most face-to-face labs require that the student complete forms in order to provide documentation that the lab was successfully completed. See "Documenting Field, Lab and Clinical Experiences" below. Labs may be pre-scheduled, requiring you to register for them in advance, or may be student-scheduled based upon your access to the appropriate equipment and partners. In other words, a student may be assigned a lab activity, but be allowed to register for a particular time or session to complete the work.

#### MM Learning Activities

<u>Textbook Chapters</u>- Every student has access to the e- books. Students will need to access the e- books through the LMS. Students are encouraged to use the e-books where possible to take advantage of any additional resources that may be presented during your reading.

Formative Tests - Chapter Quiz grades will be averaged together to provide you a "quiz" grade.

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Psychomotor Objectives

These objectives are provided by the National Registry of Emergency Medical Technicians as a part of standardized competencies. These objectives will be evaluated by the NREMT Psychomotor Examination. Students should refer to the appropriate NREMT Skills Sheet for further information.

**Patient Assessment/Management – Trauma**– All candidates will be required to perform a "hands-on," head- to-toe, physical assessment and voice treatment of a moulaged simulated patient or high-fidelity simulation manikin for a given scenario. This skill includes:

- 1. Scene Size-up
- 2. Primary Survey/Resuscitation
- 3. History Taking/Secondary Assessment
- 4. Vital Signs/Reassessment

<u>Patient Assessment/Management – Medical</u> – All candidates will be required to perform a "hands-on," head- to-toe, physical assessment and voice treatment of a moulaged simulated patient or high fidelity simulation manikin for a given scenario. This skill includes:

- 1. Scene Size-up
- 2. Primary Survey/Resuscitation Vital Signs/Reassessment

**Bag-Valve-Mask Ventilation of an Apneic Adult Patient**– All candidates will be required to provide ventilatory assistance to an apneic adult patient who has a weak carotid pulse and no other associated injuries. They are required to manually open an airway, suction the mouth and oropharynx, insert an oropharyngeal airway, and ventilate a manikin with a bag-valve-mask device.

<u>Oxygen Administration by Non-rebreather Mask</u>- All candidates will be required to assemble a regulator to a portable oxygen tank and administer oxygen by non-rebreather mask to an adult patient who is short of breath.

<u>Cardiac Arrest Management/AED</u>– All candidates will be required to integrate CPR skills, perform 2 minutes of 1-person adult CPR, attach and use the AED (including shock delivery) given a scenario of an adult patient found in cardiac arrest where no bystanders are present.

**Spinal Immobilization (Supine Patient)** – All candidates will be required to immobilize an adult patient who is found supine with a suspected unstable spine using a long spine immobilization device. An EMT Assistant will be provided and the NREMT candidate is a ls responsible for the direction and subsequent actions of the EMT Assistant.

<u>Random EMT Skills</u>- All candidates will be evaluated over one (1) of the following EMT skills chosen at random. An EMT Assistant will be provided and the NREMT candidate is also

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responsible for the direction and subsequent actions of the EMT Assistant:

- 1. Spinal Immobilization (Seated Patient)
- 2. Bleeding Control/Shock Management
- 3. Long Bone Immobilization
- 4. Joint Immobilization

### Cognitive Objectives

These objectives are provided by the National Registry of Emergency Medical Technicians as a part of standardized competencies. These objectives will be evaluated by the NREMT Psychomotor Examination. Students should refer to the appropriate NREMT Skills Sheet for further information.

- 1. Define the key terms presented in the textbook.
- 2. Describe the factors that you must consider before lifting any patient.
- 3. Give examples of common stressors in EMS work.
- 4. Describe the Scope of Practice as an EMT.
- 5. Identify situations that would constitute a breach of patient confidentiality.
- 6. Differentiate between scope of practice and standard of care.
- 7. Explain the importance of the proper use of medical terminology.
- Use anatomic terms of position and direction to describe the location of body structures and position of the body.
- 9. Explain the pathophysiology of shock.
- Describe the physical and physiological characteristics, including normal vital signs, for individuals in various age groups.
- 11. Describe common pathophysiologic problems leading to airway obstruction.
- Explain the physiological relationships between assessing and maintaining an open airway, assessing and ensuring adequate ventilation, and assessing and maintaining adequate circulation.
- Explain the ongoing nature of scene size-up beyond the initial moments at the scene.
- Discuss the difference in first steps to assess if the patient is apparently lifeless (C-A-B approach) or if the patient has signs of life, including a pulse (A-B-C approach).
- 15. Identify the vital signs used in prehospital patient assessment.
- 16. List and explain the components of the secondary assessment.
- Provide a thorough, organized, concise report of pertinent patient information when giving a radio report or requesting orders.
- 18. Follow principles of medication administration safety, including the five rights of medication.
- Differentiate between adequate and inadequate breathing based upon the rate, rhythm, and quality of breathing.
- 20. Discuss the management of a patient with acute coronary syndrome.

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- 21. Consider several possible causes of altered mental status when given scenarios involving patients with alterations in mental status.
- 22. Differentiate between the signs and symptoms of an allergic reaction and those of an anaphylactic reaction.
- 23. Describe the ways in which poisons can enter the body.
- 24. Describe the location, structure, and function of the organs in the abdominal cavity.
- 25. Recognize behaviors that are abnormal in a given context.
- 26. Identify medications that can interfere with blood clotting.
- 27. Recognize the signs and symptoms of internal and external bleeding.
- Describe types of closed soft-tissue wounds and the assessment and management of closed soft- tissue sounds.
- Describe types of open soft-tissue wounds and general assessment and care for open softtissue sounds.
- 30. Describe mechanisms of injury commonly associated with chest injuries.
- 31. Associate mechanisms of injury with the potential for musculoskeletal injuries.
- 32. Discuss the assessment and management of spine and spinal cord injuries.
- Describe the considerations for teamwork, timing, and transport decisions in assessing and managing patients with multisystem trauma or multiple trauma.
- 34. Discuss the assessment of a patient in labor, including history and physical examination.
- 35. Discuss special considerations in dealing with non-adult patients.
- Discuss adaptations that may be required in communicating with and assessing older patients.
- 37. Describe the types of equipment required to be carried by EMS response units.
- 38. Describe the responsibilities of the EMT at a hazardous materials incident.
- 39. Describe the risks to EMS providers during highway emergency operations.
- 40. Describe the risks to first responders in terrorism incidents.

#### Affective Objectives

- 1. Describe the professional value of the Axon mantra "Primum Respectum Date" (PREE-mum res-PECT-um DAH-tay), which means "first give respect."
- Give examples what types of language that might not be professionally appropriate in a clinical experience or field experience
- Give examples of activities that might demonstrate professional affect when participating in a clinical experience or field experience.

#### Library Resources

A substantial collection of Open-Access literature is available to allied health students via the Internet. Students are encouraged to conduct research using these and other materials.

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#### Syllabus for 11\_EMTB Development Course

The institution's LMS system includes direct links to journals, articles, and books that are assigned readings and links to resources that may be used in student research and self-study. These resources are credible and substantial resources, which include peer-reviewed journals, books, and institutional research monographs, among other items. This approach is significant for multiple reasons but is particularly valuable because it will include items published in very recent time frames as well as items published previously. This allows students to see historical changes in thought patterns and medical procedures in a historical context.

Students will be encouraged to engage in critical thinking skills to help identify items such as peerreviewed content and compare it to popular writing or opinion. The institution believes that developing these skills while in an academic program can encourage graduates to become lifelong learners with the capacity to discriminate among informational options.

The institution will develop corporate accounts with open-access (free) providers, and where corporate accounts do not serve the purpose well, we will encourage students to register with providers for personal access. While the list below is in no way exhaustive, examples of these resources include:

#### SpringerOpen (https://www.springeropen.com/)

SpringerOpen publishes a wide selection of open-access books across various disciplines but has specific science, technology, and medicine content.

#### Biomed Central (http://www.biomedcentral.com/)

Biomed Central makes scientific research freely accessible and discoverable through partnerships, innovation, and collaboration with the scientific community. Dedicated to open research, Biomed publishes over 290 quality peer-reviewed journals in Biology, Clinical Medicine, and Health.

#### MedKnow (http://www.medknow.com/journals.asp).

MedKnow provides open access to the official publications of various societies and associations. Most publications are peer-reviewed.

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#### PubMed Central® (PMC) (https://www.ncbi.nlm.nih.gov/pmc/)

PubMed Central® (PMC) is a free full-text archive of biomedical and life sciences journal literature at the U.S. National Institutes of Health's National Library of Medicine (NIH/NLM).

#### Highwire (http://highwire.stanford.edu/lists/freeart.dtl/)

Highwire is based out of Stanford University and is a significant resource for open-access full-text science and medical content.

#### World Health Organization (https://archive.org/details/worldhealthorganization)

The World Health Organization Book Archive provides digital full-text copies of complete books with an exceptional search interface.

#### Pocket Prep (https://www.pocketprep.com/)

Students are provided with access to Pocket Prep. Information about obtaining a code is provided in the course.

Student learning resources are available and appropriate to the level and scope of educational offerings via the information provided in the syllabi. Students have access to the above-mentioned resources, as well as additional resources we provide within the course, such as Pocket Prep. Pocket Prep is a test prep resource that uses formative competency-based learning to help students ensure their understanding of the required materials and that they are ready for the certification/licensing test.

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# Advanced EMT Syllabus

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Advanced EMT Course Syllabi

## Paramedic Program Goal and Objectives

The following information pertains to all courses in the Advanced EMT program.

#### **Advanced EMT Program Goal**

To prepare Advanced Emergency Medical Technicians who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

#### **Paramedic Program Student Outcomes**

- Graduates will be prepared to pass the National Registry of Emergency Medical Technicians Cognitive Examination and Psychomotor Examination(s).
- Graduates will be eligible to seek employment or volunteer opportunities in advanced emergency care in a variety of contexts.
- Graduates will be able to conduct excellent medical and trauma assessment and manage appropriate patient-care interventions for patients of various ages.
- Graduates will be able to provide professional and compassionate care in a diverse and multicultural society and as a part of a team of healthcare providers.

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- Graduates will be able to provide professional and compassionate care in a diverse and multicultural society and as a part of a team of healthcare providers.
- Graduates will be prepared to evaluate their own ethical boundaries and create for themselves strategies for self-directed and life-long learning.
- Advanced EMT Program Description and Courses

#### The Advanced EMT Program consists of the following courses:

- EMSP 1310 | Introduction to Advanced Practice and Public Health
- BIOL 2401 | Anatomy and Physiology
- EMSP 2355 | Clinical and Field Portfolio
- EMSP 1320 | Patient Assessment Airway Management
- EMSP 1330 | Pharmacology
- EMSP 1340 | Trauma Management and Life Support
- EMSP 1350 | Special Populations

#### EMSP 1310 | Introduction to Advanced Practice and Public Health

Introduction to Advanced Practice and Public Health provides a review of foundational Emergency Medical Service concepts to ensure that entering EMTs have an adequate historical, legal, and conceptual foundation to allow them to differentiate between basic and advanced practice. The course provides students an opportunity to evaluate their previous role in EMS in the context of the increased demands of advanced practice in terms of legal and ethical boundaries, scope of practice, and leadership requirements. The student is encouraged to examine their own goals for personal growth and psychological health in the context of advanced practice.

#### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher

#### Prerequisite:

Corequisite:

Credit

Total Credit	3
Lecture	3
Lab	0

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Total Credit	3
Clinical Experience	0
Field Experience	0
Capstone Internship	0

## BIOL 2401 | Anatomy and Physiology

Anatomy and Physiology provides an overview of anatomy and physiology appropriate for individuals entering an allied-medical field of study. This course gives students the knowledge needed to conduct emergency medical assessments of illnesses and injuries. Topics include medical terminology, anatomy, physiology, pathophysiology, and life-span development.

#### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

**NOTE:** If you have submitted proof of completion of a similar or higher-level Anatomy and Physiology Course which you received credit for, you may not be required to complete this course. Please check with the School to ensure you are completing what is required.

Prerequisite: EMSP 1310

Corequisite: None

Credit

Total Credit	4
Lecture	3
Lab	1
Clinical Experience	o
Field Experience	o
Capstone Internship	0

EMSP 2355 | Clinical and Field Portmite

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Introduction to Advanced Practice and Public Health provides a review of foundational Emergency Medical Service concepts to ensure that entering EMTs have an adequate historical, legal, and conceptual foundation to allow them to differentiate between basic and advanced practice. The course provides students an opportunity to evaluate their previous role in EMS in the context of the increased demands of advanced practice in terms of legal and ethical boundaries, scope of practice, and leadership requirements. The student is encouraged to examine their own goals for personal growth and psychological health in the context of advanced practice.

#### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

### Prerequisite: BIOL 2401; EMSP 1310

**Corequisite:** EMSP 2140. This course requires concurrent continuous enrollment with EMSP 2140, which includes lab exercises which may be pertinent to this class.

Total Credit	3
Lecture	0
Lab	0
Clinical Experience	1.5
Field Experience	1.5
Capstone Internship	o

Credit

## EMSP 1320 | Patient Assessment and Airway

Patient Assessment and Airway Management will guide the student through the development of critical thinking skills related to the practice of essential and standardized medical and trauma assessment techniques in an ALS prehospital environment. The course emphasizes airway management, advanced clinical decision-making, identification and treatment of life threats, and advanced assessment techniques.

### **Prerequisites and Corequisites**

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

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Prerequisite: EMSP 1310, BIOL 2401

Corequisite: EMSP 2140

This course requires concurrent continuous enrollment with EMSP 2140, which includes lab exercises that may be pertinent to this class.

Credit

Total Credit	3
Lecture	3
Lab	0
Clinical Experience	0
Field Experience	0
Capstone Internship	0

## R: EMSP 1330 | Pharmacology

Pharmacology provides a base-level understanding of the chemistry, classification, and regulation of pharmaceuticals. Special emphasis is given to identification and use of medications used in the prehospital setting. Students study the impact of pharmaceuticals on medical and trauma assessment and the clinical decision-making process. The role of medical direction is discussed, as well as the optimal use of medication and the identification of adverse reactions to medications and contraindications.

### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: EMSP 1310, BIOL 2401, EMSP 1320

Corequisite:

Credit

Total Credit	3
Lecture	3
Lab	0

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Total Credit	3
Clinical Experience	0
Field Experience	0
Capstone Internship	o

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## EMISP 1340 | Clinical and Field Portfolio

Trauma Management and Life Support provides the student with an opportunity to apply ALS assessment and treatment requirements to the management of both simple and complex trauma emergencies. The course emphasizes the understanding of the mechanism of injury, bleeding, soft tissue trauma, burns, face and neck trauma, head and spine trauma, chest trauma, abdominal and genitourinary trauma, orthopedic trauma, and environmental emergencies.

### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: BIOL 2401; EMSP 1310, EMSP 1320, EMSP 1330, EMSP 2420 (if in Paramedic Program)

**Corequisite:** EMSP 2140. This course requires concurrent continuous enrollment with EMSP 2140, which includes lab exercises which may be pertinent to this class.

Credit	
Total Credit	3
Lecture	3
Lab	0
Clinical Experience	0
Field Experience	0
Capstone Internship	0

EMSP 1350 | Special Populations

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#### Syllabus for 21\_Advanced EMT Development Course

Special Populations addresses the special medical and trauma assessment techniques needed to best serve pediatric, geriatric, obstetric and special-needs patients. The course emphasizes physiological differentiation and appropriate treatment strategies.

### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: EMSP 1310, BIOL 2401, EMSP 1320, EMSP 1330, EMSP 1340, EMSP 2420 (If in the Paramedic Program)

#### Corequisite:

Total Credit	3
Lecture	3
Lab	0
Clinical Experience	0
Field Experience	0
Capstone Internship	0

Getting Help

Email: support@axoneducation.com

Phone/Text: 325-218-4444

Schedule an audio or videoconference appointment: https://axonedu.as.me

(https://axonedu.as.me)

Register for Skills Lab: https://www.axoneducation.com/skills/

(https://www.axoneducation.com/skills/)

Student Resource Forms: www.axoneducation.com/student-resources

(http://www.axoneducation.com/student-resources)

Register for Clinical/Field Experiences: https://www.axoneducation.com/forms/clinical/

(https://www.axoneducation.com/forms/clinical/)

Make a payment or check on a payment:

www.tfcstudentinfo.com (http://www.tfcstudentinfo.com) or

L 800-872-9832

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## Advanced EMT Required Course Materials | Textbook

Nancy Caroline's Emergency Care in the Streets (9th Edition) Bundle ISBN13: 9781284219364

The bundle contains 1) Caroline premier digital (includes FISDAP Scheduler and FISDAP Skills Tracker), 2) FISDAP assessment package paramedic, and 3) Arrhythmia Recognition book + companion website.

## Advanced EMT Required Course Materials | Software

Access to electronic patient recording software (provided by enrollment) Access to Canvas Learning Management System (LMS) [provided by enrollment].

## Course Outline

While the list included here is intended to be comprehensive, the exact scope and sequence of this course will be dictated by the assignments presented in the LMS. Unless noted otherwise, all prescribed assignments within each chapter are to be completed.

#### i Helpful Student Resources

(https://axoneducation.instructure.com/courses/274/modules/8430)

- tg Get Started Here! (https://axoneducation.instructure.com/courses/274/modules/8431)
- i Introduction Module (https://axoneducation.instructure.com/courses/274/modules/8432)
- từ Access eBook: Nancy Caroline's Emergency Care in the Streets 9th Edition (https://axoneducation.instructure.com/courses/274/modules/8434)
- ★ Modules 1 7 | Syllabus | Introduction to Paramedicine and Public Health Unit | EMSP 1310 (https://axoneducation.instructure.com/courses/274/modules/8435)
- ☆ Module 1 | EMS Systems | Chapter 1 | EMSP 1310 (https://axoneducation.instructure.com/courses/274/modules/8436)
- từ Module 2 | Workforce Safety and Wellness | Chapter 2 | EMSP 1310 (https://axoneducation.instructure.com/courses/274/modules/8438)
- ☆ Module 3 | Public Health | Chapter 3 | EMSP 1310 (https://axoneducation.instructure.com/courses/274/modules/8443)
- ★ Module 4 | Medical, Legal, and Ethical Issues | Chapter 4 | EMSP 1310 (https://axoneducation.instructure.com/courses/274/modules/8445)

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- Module 5 | Compliance Module

   (https://axoneducation.instructure.com/courses/274/modules/8446)
- tir Module 6 | Communications | Chapter 5 | EMSP 1310 (https://axoneducation.instructure.com/courses/274/modules/8447)
- ti <u>Module 7 | Documentation | Chapter 6 | EMSP 1310</u> (<u>https://axoneducation.instructure.com/courses/274/modules/8449)</u>
- Image: Modules 8 and 9 | Syllabus | Clinical and Field Portfolio and HIPAA Compliance | EMSP

   2355 (https://axoneducation.instructure.com/courses/274/modules/8453)
- to Module 8 | Clinical and Field Portfolio | EMSP 2355 (https://axoneducation.instructure.com/courses/274/modules/17816)
- t Module 9 | HIPAA Compliance in Pre-Hospital Care (https://axoneducation.instructure.com/courses/274/modules/8455)
- t Modules 10 13 | Syllabus | Anatomy and Physiology Unit | BIOL 2401 (https://axoneducation.instructure.com/courses/274/modules/8456)
- to Module 10 | Medical Terminology | Chapter 7 | BIOL 2401 (https://axoneducation.instructure.com/courses/274/modules/8457)
- t Module 11 | Anatomy and Physiology | Chapter 8 | BIOL 2401 (https://axoneducation.instructure.com/courses/274/modules/8459)
- từ Module 12 | Pathophysiology | Chapter 9 | BIOL 2401 (https://axoneducation.instructure.com/courses/274/modules/8462)
- từ Module 13 | Life Span Development | Chapter 10 | BIOL 2401 (https://axoneducation.instructure.com/courses/274/modules/8464)
- Y Pocket Prep | Syllabus (https://axoneducation.instructure.com/courses/274/modules/12467)
- t≊ Modules 14 18 | Syllabus| Patient Assessment and Airway Management Unit | EMSP 1320 (https://axoneducation.instructure.com/courses/274/modules/8466)
- t Module 14 | Patient Assessment | Chapter 11 | EMSP 1320 (https://axoneducation.instructure.com/courses/274/modules/8467)
- t Module 15 | Critical Thinking and Clinical Decision Making | Chapter 12 | EMSP 1320 (https://axoneducation.instructure.com/courses/274/modules/8470)
- to Module 16 | Airway Management | Chapter 16 | EMSP 1320 (https://axoneducation.instructure.com/courses/274/modules/8472)
- t <u>Module 17 | Respiratory Emergencies | Chapter 17 | EMSP 1320</u> (<u>https://axoneducation.instructure.com/courses/274/modules/8475)</u>
- t <u>★ EMSP 1320 | Patient Assessment and Airway Management | Course Completion</u> <u>Module (https://axoneducation.instructure.com/courses/274/modules/17808)</u>

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- tir Modules 18 20 | Syllabus | Pharmacology Unit | EMSP 1330 (https://axoneducation.instructure.com/courses/274/modules/8479)
- tir Module 18 | Principles of Pharmacology | Chapter 13 | EMSP 1330 (https://axoneducation.instructure.com/courses/274/modules/8480)
- t Module 19 | Medication Administration | Chapter 14 | EMSP 1330 (https://axoneducation.instructure.com/courses/274/modules/8483)
- ti Module 20 | Emergency Medications | Chapter 15 | EMSP 1330 (https://axoneducation.instructure.com/courses/274/modules/8486)
- tir Modules 21 30 | Syllabus | Trauma Management and Life Support Unit | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8488)
- t Module 21 | Trauma Systems and Mechanism of Injury | Chapter 30 | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8489)
- t Module 22 | Bleeding | Chapter 31 | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8491)
- từ Module 23 | Soft-Tissue Trauma | Chapter 32 | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8498)
- t Module 24 | Burns | Chapter 33 | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8499)
- t Module 25 | Face and Neck Trauma | Chapter 34 | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8500)
- ★ Module 26 | Head and Spine Trauma | Chapter 35 | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8501)
- t≊ Module 27 | Chest Trauma | Chapter 36 | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8502)
- t Module 28 | Abdominal and Genitourinary Trauma | Chapter 37 | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8503)
- t≊ Module 29 | Orthopaedic Trauma | Chapter 38 | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8504)
- t Module 30 | Environmental Emergencies | Chapter 39 | EMSP 1340 (https://axoneducation.instructure.com/courses/274/modules/8505)
- ★ EMSP 1340 | Trauma Management and Life Support | Course Completion Module (https://axoneducation.instructure.com/courses/274/modules/17810)
- ☆ Modules 31 35 | Syllabus | Special Populations Unit and End of Course Requirements | EMSP 1350 (https://axoneducation.instructure.com/courses/274/modules/8506)

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- ★ Module 31 | Obstetrics | Chapter 42 | EMSP 1350 (https://axoneducation.instructure.com/courses/274/modules/8507)
- ti <u>Module 32 | Neonatal Care | Chapter 43 | EMSP 1350</u> (<u>https://axoneducation.instructure.com/courses/274/modules/8508</u>)
- t Module 33 | Pediatric Emergencies | Chapter 44 | EMSP 1350 (https://axoneducation.instructure.com/courses/274/modules/8509)
- to Module 34 | Geriatric Emergencies | Chapter 45 | EMSP 1350 (https://axoneducation.instructure.com/courses/274/modules/8510)
- to <u>Module 35 | Patients With Special Challenges | Chapter 46 | EMSP 1350</u> (<u>https://axoneducation.instructure.com/courses/274/modules/8511</u>)
- t EMSP 1350 | Special Populations | Course Completion Module (https://axoneducation.instructure.com/courses/274/modules/17812)
- t Module 36 | AEMT Readiness Exam on FISDAP (https://axoneducation.instructure.com/courses/274/modules/17814)
- t Module 37 | AEMT End of Course Documents (https://axoneducation.instructure.com/courses/274/modules/8512)
- từ <u>Appendix | Career Development</u> (<u>https://axoneducation.instructure.com/courses/274/modules/8513)</u>
- **Y** TestPrep (https://axoneducation.instructure.com/courses/274/modules/8514)
- **Simulations** (https://axoneducation.instructure.com/courses/274/modules/8515)
- 한 Virtual Ride -Alongs (https://axoneducation.instructure.com/courses/274/modules/8516)
- TX AEMT Discussions (https://axoneducation.instructure.com/courses/274/modules/8517)

## Grade Calculation

The program-wide Grading Policy and the institution's Grading Scale are included in the EMTB Course Common Syllabus Elements below. Students are encouraged to read these items carefully and should be aware that there are program-wide pass-fail elements referred to as Critical Criteria that, if breached, may cause a student to be issued a failing grade for the entire program.

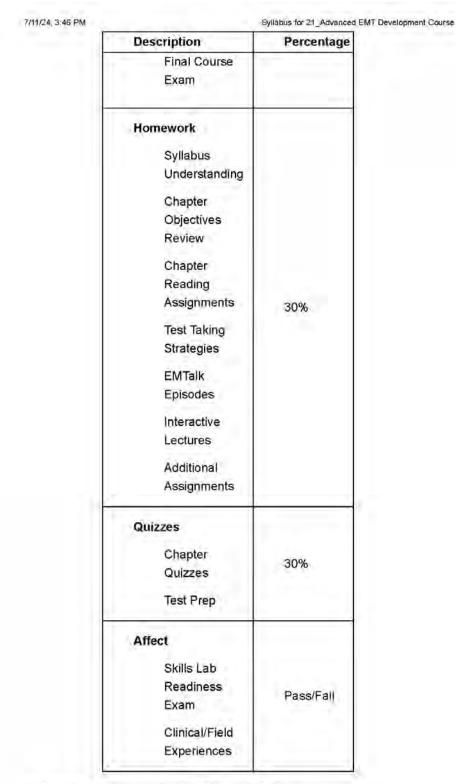
Grades for this individual course will be calculated as follows:

Description	Percentage
Examinations	40%

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## Pass/Fail Affect

There are several elements that are not used to calculate your grade, but must be passed in order to achieve an overall passing grade. These include:

- Critical Criteria Labs
- Field Experiences and Clinical Experiences
- Completion of the NREMT Psychomotor Examination (Conducted at Skills Lab)
- Documentation of achievement of an American Heart Association BLS Card

## Course/Program Format and Assignments

This course is presented in an online learning format. A general overview of course assignments is included in this syllabus. Specific and detailed information about all assignments is included in the Learning Management System (LMS). Students who perform poorly on a particular activity may be required to repeat the activity or may be assigned remedial work.

There is no exact schedule for this course. Students are encouraged to move through the course as quickly as they are able; however, the course must be completed by the deadline established by the Maximum Course Duration described below.

Course progress may be judged by 1.) whether the student is meeting the Minimum Activity Policy for the entire program described elsewhere in this syllabus and 2.) whether the Teaching Team believes the student is completing the work in a timeframe which will allow the student to complete the entire program within the Maximum Course Duration described elsewhere in this syllabus. In all cases, if the Teaching Team determines that a student is struggling, then it has the authority to prescribe deadlines for specific assignments or the entire course.

Advanced EMT Maximum Instructional Deadline (MID)

#### Maximum Instructional Deadline (MID)

The Maximum Instructional Deadline for this course is 33 weeks. Students will have 33 weeks from the cohort start date to complete all online assignments and complete at least one attempt at the Field Internship Student Data Acquisition Project (FISDAP) Comprehensive Readiness Exam.

Students must schedule their Readiness Exam prior to 30 days before their MID. Furthermore, Students must complete an initial attempt at the Readiness Exam prior to their MID.

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Advanced EMT Maximum Course Duration

### Maximum Course Duration (MCD)

The Maximum Course Duration for this course is **40** weeks. The MCD may be extended at the sole discretion of the Teaching Team. The decision will be based on the student's demonstration of overall course progress, furloughs awarded due to special life circumstances, scheduled holidays, etc. Students wishing to seek an extension of the Maximum Course Duration should formally request an extension by submitting a FLEX Request through the link on the Student Resources Page. Extensions will only be considered if requested in advance of the MCD deadline.

Students who remain in the course after the Maximum Instructional Deadline but prior to the end of the Maximum Course Duration may be assigned additional mandatory activities necessary for course completion. While Axon courses each have a Maximum Course Duration, the courses employ adaptive learning technologies and are, therefore, highly personalized for each student. Students may complete the course as rapidly as they are able to meet all requirements.

Because this course is based upon a Flexible Time Schedule, it is possible that a student may be assigned a failing grade for the course prior to the end of the Maximum Instructional Deadline or the deadline for the Maximum Course Duration. Causes for course failure include but are not limited to violations of the Minimum Activity Policy, positive results on the required drug- screening, failure to meet compliance deadlines for documentation related to enrollment requirements, dismissal, or other reasons articulated in the course syllabus.

## Attendance Policy

This course is competency-based and is presented in an online format. There are no mandatory weekly sessions. Instead, students may move through the curriculum as quickly as they are able within a set of parameters (See Maximum Course Duration). There are mandatory face-to-face sessions or electronic meetings that must be attended; however, most of these sessions will be scheduled by the student. Attendance at skills labs, clinical experiences, field experiences, and scheduled tutoring sessions will be tracked, and students failing to appear or who arrive late for participation will be required to make up all sessions or missed content.

## Attendance Policy Specific to Skills Labs

Students are required to attend at least two [2] face-to-face Immersive Skills Labs. Skills Labs generally last two days. During these labs, students will learn and practice hands-on skills and ultimately prepare for the NREMT Psychomotor Examination. Students may be

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required to attend an additional Skills Lab if they have not demonstrated competency in the clinical/field setting.

Skills Labs are conducted regularly at the Abilene and Houston class locations. Students must schedule their first Skills Lab within 60 days of their official cohort start date and when able, based on current offerings, all Skills Labs. Students are encouraged to sign up for the Skills Labs as early in the course as possible, to ensure that they are able to attend sessions that are convenient to them in terms of timing. Finally, students are also encouraged to get away from routine responsibilities such as other schooling, work, family obligations, etc. during Skills Labs due to the need to focus intently on the lab instruction. Students may register online by visiting: https://www.axoneducation.com/skills/. Students should also arrange for travel and sleeping accommodations as soon as possible after they have registered for their desired session dates.

## Attendance Policy Specific to Clinical/Field Experiences

Students must initiate the scheduling of their clinics within 30 days of the completion of their final Skills Lab. Late arrival to, or failure to attend, a scheduled clinical experience or field experience without notifying Axon in advance will be treated as unprofessional behavior and may result in a breach of Critical Criterion #4 – Positive Affect (see below), and it could result in the student failing the course. It is understood that in rare cases, emergencies happen that could prevent a student from notifying Axon of the late arrival or cancellation in advance, but pre-notification of late arrival or cancellation is expected in all cases. All missed clinical experiences, or field experiences, must be made up. The Teaching Team may also assign remedial work or additional shifts in cases where shifts, or portions of shifts, were missed.

## Documenting Field, Lab, and Clinical Experiences

The institution mandates that every student who attends a clinical or field experience write a patient care report, herein referred to as a PCR, for each patient they come into contact with. Each PCR must include completion of the required checkboxes and form selections, as well as a comprehensive narrative in CHART format, as described in the course content.

Towards the end of each clinical and field experience, the student must prompt their preceptor to complete the end-of-shift evaluation requirements, as described in course content, and a preceptor sign-off before leaving the facility on that date. Failure to do so will require the student to complete another clinical/field experience to replace that shift date. The institution will not reach out to the site on the student's behalf to obtain those documents after the fact. The student is prohibited from reaching out to the site on

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their own, as doing so would put the student at risk for administrative removal from the program.

The institution recognizes that students may not be able to write detailed PCRs while on their clinical or field experience due to reasons including, but not limited to a busy shift. That being said, students will have up to 48 hours from shift end time to write their PCRs for that date and complete the required evaluations for which they are responsible.

## Grading

This course is offered to fulfill the requirements of an Advanced EMT Certification course. A final grade will be issued for the course after completion. There are two crucial characteristics of course grades that the student needs to consider:

1) While grades for individual courses may be used to identify areas of competency for the Axon program, these grades will not be articulated to Axon Education partners for inclusion in degree programs unless the student successfully completes the entire program and becomes eligible to participate in the National Registry of Emergency Medical Technicians Psychomotor Examinations and Cognitive Examination. Students may not expect articulation of individual course credits in the absence of success in the entire certification program.

2) There are programmatic Critical Criteria discussed elsewhere in this document that, if unmet, could result in the issuance of a failing final grade for the program, regardless of the student's success or performance in other aspects of the program. Failure to meet these Critical Criteria for the entire program could effectively negate articulated credit for any course included in the program to other institutions.

This course is competency based overall, which allows for students to improve their performance in most areas. Generally, students are allowed and encouraged to attempt completion of assignments as many times as necessary to achieve a satisfactory grade or as often as desired to improve a grade or enhance competency. In most cases, assignments are considered "open-book," which means that the student is encouraged to use all tools at their disposal to demonstrate success in the task at hand. In certain limited cases, assignments or examinations may be proctored and may include specific limitations on the environment in which the activity is completed or limitations on the tools or resources that may be used as a part of the effort.

## Proctored Assignments

Certain assignments or evaluations must be proctored. Instructions for proctored activities will be included at the time the assignment is given and may include the use of third-party organizations that provide student proctoring. In such a case, the student will be https://axoneducation.instructure.com/courses/274/assignments/syllabus

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responsible for paying for the proctoring session. The Axon Teaching Team may, at their sole discretion, require that an assignment for a particular student be proctored even if proctoring is not required for the same or similar assignment for all other students.

## <sup>3</sup> Standardized Examinations

Examinations may be conducted using nationally standardized instruments developed and administered by third parties. In these cases, proctoring will be employed, and students may be explicitly restricted in the environment in which the exam will be conducted. Unless otherwise indicated, Axon will allow students one attempt at the nationally standardized examinations without additional costs to students on the first attempt. They will also be required to show satisfactory progress within this product. The student will have three additional attempts at no cost to the student after they have purchased the study tools. Students who are in need of additional attempts beyond the initial four attempts for any reason will be required to pay an additional nominal fee for each pair of attempts.

### Final Exam

This course will include a final examination. The exam may or may not require proctoring, and specific requirements will be provided in the Learning Management System. The Teaching Team has the authority to require proctoring on any assignment including final examinations.

Where appropriate, final examinations may be conducted using nationally standardized exams. These exams have been administered to thousands of students each year and may provide a more rigorous experience as well as results that are highly predictive of student success.

"Cut Scores" are often assigned for final examinations that dictate the minimum score a student must achieve to successfully complete the course or program.

## Simulations and "Ride-Alongs"

These are specific homework assignments within Canvas that will guide students through scenarios giving them direction on how they should respond within the scope of practice of Paramedic in the field. Students will be required to use their critical thinking skills in order to follow along and make decisions as the provider throughout these homework assignments. These assignments are included in the "homework" grade issued within Canvas.

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## Skills Labs Grading

Skills Labs are graded on a pass/fail basis. Students may be precluded from proceeding to next steps in this course if they have not demonstrated competency in particular psychomotor skills.

## FISDAP Readiness Exam

Students will be allowed a maximum of six (6) attempts at the Readiness Exam or any individual Unit Exam. Students requiring more than four attempts at the Readiness Exam will be required to purchase additional exam attempts. Students who are unsuccessful after six attempts at any single Unit Exam or the Readiness Exam may not be eligible to complete the course and may be assigned a failing grade of F. Students who are unsuccessful after their first three (3) attempts at passing any single Unit Exam or the Readiness Exam may be placed on Academic Probation. Students placed on Academic Probation as a result of failed attempts at the Unit Exams or the Readiness Exam must purchase the FISDAP Study Tool associated with their program before being allowed to access the remaining attempts on their exam(s).

## Portfolio

Every paramedic student must complete the program-required portfolio of skills and patient care experiences prior to graduation. Each of the relevant skills and patient care encounters must be documented throughout the program. Students are encouraged to be vigilant in pursuing opportunities for skills and patient care experiences to achieve their totals. Students must complete 100% of their portfolio to successfully complete the program.

## Affective Grade

The Axon Education Latin Motto is "Primum Respectum Date" (PREE-mum res-PECTum DAH-tay), which means "first give respect." In other words, Axon is encouraging its students to offer respect to others, even before they earn it. When students choose to show respect to everyone they come in contact with, they will cause others to respect them and create an atmosphere that is less likely to be clouded with bigotry, racism, and inappropriate judgment. Each student should carefully read Critical Criterion #4 – Positive Affect Criterion below. While a student's affect may not directly impact an assignment of a particular numeric or letter grade, inappropriate affect in all educational

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situations related to the completion of this course has the potential to cause a student to be assigned a failing grade.

## Program Critical Criteria

This course contains several Critical Criteria that, if unmet, could result in the issuance of a failing final grade for the course, regardless of the student's success or performance in other aspects of the course.

- Critical Criterion #1 Compliance Deadline Criterion
  - Students must submit all necessary compliance documentation by the Compliance Date, which is 30 days from the date of their enrollment.
- Critical Criterion #2 Minimum Activity Criterion
  - During the Instructional Period (first 20 weeks or as individually assigned by the Teaching Team), students must log in and complete at least one assignment each week; note that this will not allow a student to finish in the expected timeline.
     Minimum activity is evaluated each Monday for the preceding seven days (Monday through Sunday). Students attending a Skills Lab or participating in a Clinical Experience or Field Experience may request an exemption for the actual week in which the student was involved in the face-to-face activity.
- Critical Criterion #3 Student Responsiveness Criterion
  - The Teaching Team may establish that an individual has failed to achieve the Student Responsiveness Criterion by evaluating their pattern of communication. Students are expected to adequately respond to institutional inquiries in a timely manner. A student's adequate and timely responses to written inquiries, text messages, voicemails, and other means of communication from institutional representatives are considered mandatory elements of course progress, even when such inquiries are not directly related to academic performance.
- Critical Criterion #4 Positive Affect Criterion
  - The Teaching Team may establish that an individual has failed to achieve the Positive Affect Criterion if a student exhibits ongoing or acutely disruptive affect or unprofessional behavior to fellow students, institutional personnel, clinical partner personnel, or other stakeholders. Satisfactory student progress in this regard is established, among other means, by demonstrating a willingness to work as a productive team member with other students, and especially with clinical partners. This includes dressing, speaking, and acting professionally while in school contexts.

#### ADA Statement

At times, it may be necessary for students with special needs or disabilities to receive special or reasonable accommodation. Axon Education will make reasonable https://axoneducation.instructure.com/courses/274/assignments/syllabus

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accommodations to meet the needs of students with disabilities. To request an accommodation, students should contact Student Support at support@axoneducation.com.

## Syllabus Affirmation Requirement

Each student will be required to acknowledge his or her receipt and understanding of this entire syllabus in an assignment in the Canvas Learning Management System.

## A Note to Our Students

We care about your success! If you need help in the course or the program, please reach out to us by email or phone so that we can understand your need and help you. If you need to schedule time for tutoring or emotional support, please do not hesitate to schedule an appointment.

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## Paramedic Syllabi

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Paramedic Course Syllabi



## Paramedic Program Goal and Objectives

The following information pertains to all courses in the Paramedic program. Paramedic Program Goal

To prepare Paramedics who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

## Paramedic Program Student Outcomes

- Graduates will be prepared to pass the National Registry of Emergency Medical Technicians Cognitive Examination and Psychomotor Examination(s).
- Graduates will be eligible to seek employment or volunteer opportunities in advanced emergency care in a variety of contexts.
- Graduates will be able to conduct excellent medical and trauma assessment and manage appropriate patient-care interventions for patients of various ages.

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- Graduates will be able to provide professional and compassionate care in a diverse and multicultural society and as a part of a team of healthcare providers.
- Graduates will be able to provide professional and compassionate care in a diverse and multicultural society and as a part of a team of healthcare providers.
- Graduates will be prepared to evaluate their own ethical boundaries and create for themselves strategies for self-directed and life-long learning.

Paramedic Program Courses

The Paramedic Program consists of the following courses:

- EMSP 1310 | Introduction to Advanced Practice and Public Health
- EMSP 2355 | Clinical and Field Portfolio
- BIOL 2401 | Anatomy and Physiology
- EMSP 1320 | Patient Assessment Airway Management
- EMSP 1330 | Pharmacology
- EMSP 2420 | Cardiology
- EMSP 1340 | Trauma Management and Life Support
- EMSP 1350 | Special Populations
- EMSP 2410 | Medical Emergencies
- EMSP 2330 | EMS Operations
- EMSP 2140 | Assessment Based Management
- EMSP 2145 | Career Lab
- EMSP 2250 | Capstone Field Internship

Course information is listed below and the module information is in the section, Program/Course Outline.

## EMSP 1310 | Introduction to Advanced Practice and Public Health

Introduction to Advanced Practice and Public Health provides a review of foundational Emergency Medical Service concepts to ensure that entering EMTs have an adequate historical, legal, and conceptual foundation to allow them to differentiate between basic and advanced practice. The course provides students an opportunity to evaluate their previous role in EMS in the context of the increased demands of advanced practice in terms of legal and ethical boundaries, scope of practice, and leadership requirements. The student is encouraged to examine their own goals for personal growth and psychological health in the context of advanced practice.

#### Prerequisites and Corequisites

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Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher

Prerequisite:

Corequisite:

Credit

Total Credit	3	
Lecture	3	11
Lab	0	
Clinical Experience	o	1
Field Experience	o	ľ
Capstone Internship	o	

## EMSP 2355 | Clinical and Field Portfolio

Introduction to Advanced Practice and Public Health provides a review of foundational Emergency Medical Service concepts to ensure that entering EMTs have an adequate historical, legal, and conceptual foundation to allow them to differentiate between basic and advanced practice. The course provides students an opportunity to evaluate their previous role in EMS in the context of the increased demands of advanced practice in terms of legal and ethical boundaries, scope of practice, and leadership requirements. The student is encouraged to examine their own goals for personal growth and psychological health in the context of advanced practice.

## Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher,

#### Prerequisite: BIOL 2401; EMSP 1310

**Corequisite:** EMSP 2140. This course requires concurrent continuous enrollment with EMSP 2140, which includes lab exercises which may be pertinent to this class.

Credit

Total Credit	3	)
Lecture	0	_

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Total Credit	3
Lab	0
Clinical Experience	1.5
Field Experience	1.5
Capstone Internship	o

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## BIOL 2401 | Anatomy and Physiology

Anatomy and Physiology provides an overview of anatomy and physiology appropriate for individuals entering an allied-medical field of study. This course gives students the knowledge needed to conduct emergency medical assessments of illnesses and injuries. Topics include medical terminology, anatomy, physiology, pathophysiology, and life-span development.

### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

**NOTE:** If you have submitted proof of completion of a similar or higher-level Anatomy and Physiology Course which you received credit for, you may not be required to complete this course. Please check with the School to ensure you are completing what is required.

Prerequisite: EMSP 1310

Corequisite: None

Credit

Total Credit	4
Lecture	3
Lab	1
Clinical Experience	0
Field Experience	0
Capstone Internship	0

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A Pocket Prep

### DESCRIPTION

Pocket Prep is an exciting tool for you to use as you prepare to take the NREMT at the end of your program. The functionality that Pocket Prep currently uses will help you to become more familiar with the types of questions you may encounter when you take the NREMT (National Registry of Emergency Medical Technicians) Cognitive Exam.

Pocket Prep allows you to take a quick 10-question quiz, answer a daily question, create a quiz based on their desired categories and number of questions, or take a mock exam with up to 150 questions. The questions can be broken down into the normal categories that the NREMT Cognitive Exam evaluates. The following categories represent the current categories in Pocket Prep: Medical; Obstetrics & Gynecology; Airway, Respiration & Ventilation; Cardiology & Resuscitation; Trauma; EMS (Emergency Medical Services) Operations; and EKG Monitoring (Paramedic students only).

### REQUIRED MATERIALS

Pocket Prep Test App Available in the App Store/Google Play

### EXPECTATIONS

Students are expected to complete the majority of the questions in the question bank offered by Pocket Prep. The student will be given assignments in their learning management software (LMS) that directs them to complete quizzes based on the course material they are currently studying or their relationship to the end of the course. The student must report their completion of the quizzes in their course assignments honestly and accurately. Failure to honestly report the students' progress will result in a deduction of the student's Affect score and/or dismissal from the program for dishonestly.

## EMSP 1320 | Patient Assessment and Airway

Patient Assessment and Airway Management will guide the student through the development of critical thinking skills related to the practice of essential and standardized medical and trauma assessment techniques in an ALS prehospital environment. The course emphasizes airway management, advanced clinical decision-making, identification and treatment of life threats, and advanced assessment techniques.

#### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: EMSP 1310, BIOL 2401

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Corequisite: EMSP 2140

This course requires concurrent continuous enrollment with EMSP 2140, which includes lab exercises that may be pertinent to this class.

Credit

Total Credit	3
Lecture	3
Lab	0
Clinical Experience	0
Field Experience	0
Capstone Internship	0

## EMSP 1330 | Pharmacology

Pharmacology provides a base-level understanding of the chemistry, classification, and regulation of pharmaceuticals. Special emphasis is given to identification and use of medications used in the prehospital setting. Students study the impact of pharmaceuticals on medical and trauma assessment and the clinical decision-making process. The role of medical direction is discussed, as well as the optimal use of medication and the identification of adverse reactions to medications and contraindications.

## Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: EMSP 1310, BIOL 2401, EMSP 1320

Corequisite:

#### Credit

Total Credit	3
Lecture	3
Lab	0
Clinical Experience	0

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Total Credit	3
Field Experience	0
Capstone Internship	0

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## EMSP 2420 | Carchotomy

Cardiology is a deep introduction to prehospital cardiac assessment and treatment for ALS providers. Topics include cardiac anatomy and basic physiology, electrophysiology, calculating rates, vectors and the basic beat, 12-lead ECGs, electrocardiography and arrhythmia recognition, rhythm strip interpretation, normal sinus rhythm, sinus bradycardia, sinus tachycardia, sinus arrhythmia, sinus blocks, etc. Emphasis is given to accurate identification of arrhythmia in a broad variety of contexts.

## Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: EMSP 1310, BIOL 2401, EMSP 1320, EMSP 1330

### Corequisite:

If you are completing the Advanced EMT Program you do not need to complete this course.

Credit	
Total Credit	4
Lecture	4
Lab	0
Clinical Experience	0
Field Experience	0
Capstone Internship	0

## Credit

EMSP 1340 | Trauma Management and Life Support

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Trauma Management and Life Support provides the student with an opportunity to apply ALS assessment and treatment requirements to the management of both simple and complex trauma emergencies. The course emphasizes the understanding of mechanism of injury, bleeding, soft tissue trauma, burns, face and neck trauma, head and spine trauma, chest trauma, abdominal and genitourinary trauma, orthopedic trauma, and environmental emergencies.

### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: BIOL 2401; EMSP 1310, EMSP 1320, EMSP 1330, EMSP 2420 (if in Paramedic Program)

**Corequisite:** EMSP 2140. This course requires concurrent continuous enrollment with EMSP 2140, which includes lab exercises which may be pertinent to this class.

Total Credit	3	
Lecture	3	
Lab	0	
Clinical Experience	ò	
Field Experience	o	
Capstone Internship	0	

Credit

## EMSP 1350 | Special Populations

Special Populations addresses the special medical and trauma assessment techniques needed to best serve pediatric, geriatric, obstetric and special-needs patients. The course emphasizes physiological differentiation and appropriate treatment strategies.

#### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: EMSP 1310, BIOL 2401, EMSP 1320, EMSP 1330, EMSP 1340, EMSP 2420 (If in the Paramedic Program)

#### Corequisite:

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Credit	
Total Credit	3
Lecture	3
Lab	0
Clinical Experience	0
Field Experience	0
Capstone Internship	0

## EMSP 2410 | Medical Emergencies

Medical Emergencies provides a student with an overview of a variety of medical emergencies. The student will be expected to apply ALS assessment and treatment techniques to the management of both simple and complex medical emergencies.

Topics include respiratory emergencies, cardiovascular emergencies, neurological emergencies, diseases of the eyes, ears, nose, and throat, abdominal and gastrointestinal, genitourinary and renal emergencies, gynecologic emergencies, endocrine emergencies, hematologic emergencies, immunologic emergencies, infectious diseases, and toxicology,

#### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: EMSP 1310, BIOL 2401, EMSP 1320, EMSP 1330, EMSP 1340, EMSP 1350, EMSP 2420 (If in the Paramedic Program)

#### Corequisite:

oreun	
Total Credit	4
Lecture	4
Lab	0
Clinical Experience	o
Field Experience	o

Credit

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Total Credit	4
Capstone	0
Internship	0

## EMSP 2330 ) EMS Operations

EMS Operations will serve as a review of the operations side of Emergency Medical Services that the student would have gained at the EMT provider level. Emphasis will include ALS leadership for operational decision-making.

Topics include transport operations, incident management, mass-casualty incidents, vehicle extrication and special rescue, hazardous materials, terrorism response, disaster response, and crime scene awareness.

## Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: EMSP 1310, BIOL 2401, EMSP 1320, EMSP 1330, EMSP 1340, EMSP 1350, EMSP 2410, EMSP 2420 (If in the Paramedic Program)

### Corequisite:

Total Credit	3
Lecture	3
Lab	0
Clinical Experience	o
Field Experience	o
Capstone Internship	o

Credit

## EMSP 2140 | Assessment Based Management

Assessment Based Management is designed to allow the student to demonstrate competency through high-fidelity simulations. Students will maintain enrollment in this course for the duration of the program and may, therefore, be concurrently enrolled in this course and others prior to enrollment in EMSP 2250 Capstone Field Experience. Students will engage in increasingly

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#### Syllabus for 31\_Paramedic Development Course

complex scenarios that require them to demonstrate the comprehension of course material, psychomotor skills, and behavior required to manage a successful patient encounter. Students will attend a minimum of 3 two-day skills lab sessions culminating in lab experiences that mimic the National Registry of Emergency Medical Technicians (NREMT) -Paramedic Examinations. Because the course is competency-based, students may be required to attend more than the minimum number of skills-lab sessions in order to achieve course success.

#### Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

#### Prerequisite:

Corequisite: This course may require concurrent continuous enrollment with any and possibly all courses.

Total Credit	1	
Lecture	0	
Lab	1	
Clinical Experience	0	
Field Experience	o	1
Capstone Internship	o	

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## EMSP 2145 | Career Lab

Career Lab provides students with intensive study opportunities to prepare for and complete the Paramedic Program Readiness Exam, which subsequently prepares them for the National Registry of Emergency Medical Technicians Paramedic Cognitive Examination. Additionally, students are required to obtain the American Heart Association Advanced Cardiovascular Life Support card and the American Heart Association Pediatric Advance Life Support card. Students will attempt the Paramedic Program Readiness Exam multiple times. Based on student performance, remedial exercises may be assigned.

#### Prerequisites and Corequisites

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Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: EMSP 1310, BIOL 2401, EMSP 1320, EMSP 1330, EMSP 1340, EMSP 1350, EMSP 2410, EMSP 2420 (If in the Paramedic Program), EMSP 2330, EMSP 2140

Corequisite: EMSP 2250. This course may be concurrent continuous enrollment with EMSP 2250.

Note: Portions of the requirements for this course (ACLS & PALS) may be completed through thirdparty American Heart Association providers at the student's expense.

Credit	
Total Credit	1
Lecture	0
Lab	1
Clinical Experience	0
Field Experience	0
Capstone Internship	0

Credit

## BA EMSP 2250 | Capsione Field Internship

The Capstone Field Internship will serve to allow the student/paramedic candidate to operate in the role of a lead paramedic on a working ambulance operating in a 911/emergency setting. Students will continue to demonstrate and document competencies, which include skills performed or interpreted across a variety of patient ages, differential diagnoses, or complaints, but as a part of the Capstone Field Internship, will focus on completing and documenting a specific number of team leads representing a variety of skills. It is impossible to predict the frequency or mix of live-patient encounters that may occur during a given field internship experience.

- As a result, it is impossible to specify in advance the number of hours that may be required to complete the Capstone Field Internship. The requirements for the course presume a nominal face-to-face involvement of at least 120 hours. Students are responsible for scheduling and completing a sufficient number of field internship hours necessary to obtain the minimum number of 120 hours and 20 team leads that are transported to the emergency department.
- The Paramedic candidate can only count team leads for our program that are initiated through the 911 System, or as an emergency transfer for higher level of care from a facility to an emergency department.

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Syllabus for 31\_Paramedic Development Course

### Definitions

#### 911/Emergency Setting:

- Any emergency response that is initiated by a call to the emergency dispatch center. They may also include transfers from stand-alone emergency departments, nursing homes, assisted living facilities, or urgent care clinics; so long as the patient is being transported to a higher level of care. These do not include interfacility transfers where the end destination is not an emergency department, unless transport is from a lower level of care to a higher level of care.
- Team Lead:
  - The Paramedic student must conduct a comprehensive assessment, establish a field impression, determine patient acuity, formulate a treatment plan, direct the treatment, and direct and participate in the transport of the patient to a medical facility, transfer of care to a higher level of medical authority, or termination of care in the field (cardiac arrest patients only).
- Facility:
  - Any health care facility that provides long-term care, specialized nursing services, acute urgent care, primary care, or radiological services.
- Emergency Department:
  - Department or room within a hospital as determined by federal or state law for the provision of emergency health care services. This does not include freestanding emergency medical care facilities.

Prerequisites and Corequisites

Program admission, which requires EMTB National Registry or Texas DSHS EMTB certification or higher.

Prerequisite: EMSP 1310, BIOL 2401, EMSP 1320, EMSP 1330, EMSP 1340, EMSP 1350, EMSP 2410, EMSP 2420 (If in the Paramedic Program), EMSP 2330, EMSP 2140

## Corequisite:

Credit

Total Credit	2
Lecture	0
Lab	0
Clinical Experience	0
Field Experience	0

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Total Credit2Capstone<br/>Internship2

## Getting Help

Email: support@axoneducation.com
 Phone/Text: 325-218-4444
 Schedule an audio or videoconference appointment: <a href="https://axonedu.as.me">https://axonedu.as.me</a>
 (<a href="https://axonedu.as

Syllabus for 31\_Paramedic Development Course

\$ 800-872-9832

## Paramedic Required Course Materials | Textbook(s)

Nancy Caroline's Emergency Care in the Streets (9th Edition) Bundle ISBN13: 9781284219364

The bundle contains 1) Caroline Premier Digital (includes FISDAP Scheduler and FISDAP Skills Tracker), 2) FISDAP assessment package paramedic, and 3) Arrhythmia Recognition book + companion website.

Introduction to Basic Cardiac Dysrhythmias, 5th Edition, ISBN 978-1-284-13968-6 (Atwood, Sandra; Stanton, Cheryl; Storey-Davenport, Jenny (The book is included in tuition, and you will receive it during Skills Lab.

## Paramedic Required Course Materials | Software

Access to electronic patient recording software (provided by enrollment) Access to Canvas Learning Management System (LMS) [provided by enrollment].

## The Program/Course Outline

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Syllabus for 31\_Paramedic Development Course

While the list included here is intended to be comprehensive, the exact scope and sequence of this course will be dictated by the assignments presented in the LMS. Unless noted otherwise, all prescribed assignments within each chapter are to be completed.

- Y Helpful Student Resources (https://axoneducation.instructure.com/courses/260/modules/7309)
- 한 Get Started Here (https://axoneducation.instructure.com/courses/260/modules/7310)
- i Module Introduction (https://axoneducation.instructure.com/courses/260/modules/7311)
- ★ Access eBook | Nancy Caroline's Emergency Care in the Streets 9th Edition (https://axoneducation.instructure.com/courses/260/modules/7458)
- ☆
   Modules 1 6 | Syllabus | Introduction to Advanced Practice and Public Health Unit | EMSP

   1310 (https://axoneducation.instructure.com/courses/260/modules/7312)
- ☆ Module 1 | EMS Systems | Chapter 1 | EMSP 1310 (https://axoneducation.instructure.com/courses/260/modules/7313)
- ★ Module 2 | Workforce Safety and Wellness | Chapter 2 | EMSP 1310 (https://axoneducation.instructure.com/courses/260/modules/7314)
- ★ Module 3 | Public Health | Chapter 3 | EMSP 1310 (https://axoneducation.instructure.com/courses/260/modules/7316)
- ★ Module 4 | Medical, Legal, and Ethical Issues | Chapter 4 | EMSP 1310 (https://axoneducation.instructure.com/courses/260/modules/7317)
- Module 4A | Compliance Module (https://axoneducation.instructure.com/courses/260/modules/7318)
- t <u>Module 5 | Communications | Chapter 5 | EMSP 1310</u> (<u>https://axoneducation.instructure.com/courses/260/modules/7319</u>)
- ti <u>Module 6 | Documentation | Chapter 6 | EMSP 1310</u> (<u>https://axoneducation.instructure.com/courses/260/modules/7320)</u>
- ★ EMSP 1310 | Introduction to Advanced Practice and Public Health | Course Completion Module (https://axoneducation.instructure.com/courses/260/modules/11242)
- tig Module 7 | Syllabus | Clinical and Field Portfolio Unit | EMSP 2355 (https://axoneducation.instructure.com/courses/260/modules/7321)
- ★ Modules 8 12 | Syllabus | Anatomy and Physiology Unit | BIOL 2401 (https://axoneducation.instructure.com/courses/260/modules/7323)
- t Module 8 | HIPAA Compliance in Pre-hospital Care (https://axoneducation.instructure.com/courses/260/modules/7322)
- tor Module 9 | Medical Terminology | Chapter 7 | BIOL 2401 (https://axoneducation.instructure.com/courses/260/modules/7324)

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Syllabus for 31\_Paramedic Development Course

- ☆ Module 10 | Anatomy and Physiology | Chapter 8 | BIOL 2401 (https://axoneducation.instructure.com/courses/260/modules/7325)
- Image: Module 11 | Pathophysiology | Chapter 9 | BIOL 2401
   (https://axoneducation.instructure.com/courses/260/modules/7326)
- t ☆ Module 12 | Life Span Development | Chapter 10 | BIOL 2401 (https://axoneducation.instructure.com/courses/260/modules/7327)
- t BIOL 2401 | Anatomy and Physiology | Course Completion Module (https://axoneducation.instructure.com/courses/260/modules/11244)
- 한 Pocket Prep | Syllabus (https://axoneducation.instructure.com/courses/260/modules/11936)
- ★ Modules 13 16 | Syllabus | Patient Assessment and Airway Management Unit | EMSP 1320 (https://axoneducation.instructure.com/courses/260/modules/7328)
- từ Module 13 | Patient Assessment | Chapter 11 | EMSP 1320 (https://axoneducation.instructure.com/courses/260/modules/7329)
- ★ Module 14 | Critical Thinking and Clinical Decision Making | Chapter 12 | EMSP 1320 (https://axoneducation.instructure.com/courses/260/modules/7330)
- t≊ Module 15 | Airway Management | Chapter 16 | EMSP 1320 (https://axoneducation.instructure.com/courses/260/modules/7331)
- ★ Module 16 | Respiratory Emergencies | Chapter 17 | EMSP 1320 (https://axoneducation.instructure.com/courses/260/modules/7332)
- t <u>EMSP 1320 | Patient Assessment and Airway Management | Course Completion Module</u> (<u>https://axoneducation.instructure.com/courses/260/modules/11245</u>)
- ★ Modules 17 19 | Syllabus | Pharmacology Unit | EMSP 1330 (https://axoneducation.instructure.com/courses/260/modules/7334)
- t <u>Module 17 | Principles of Pharmacology | Chapter 13 | EMSP 1330</u> (https://axoneducation.instructure.com/courses/260/modules/7335)
- t≊ Module 18 | Medication Administration | Chapter 14 | EMSP 1330 (https://axoneducation.instructure.com/courses/260/modules/7336)
- t Module 19 | Emergency Medications | Chapter 15 | EMSP 1330 (https://axoneducation.instructure.com/courses/260/modules/7337)
- từ EMSP 1330 | Pharmacology | Course Completion Module (https://axoneducation.instructure.com/courses/260/modules/11246)
- to <u>Modules 20 32 | Syllabus | Cardiology Unit | EMSP 2420</u> (<u>https://axoneducation.instructure.com/courses/260/modules/7338</u>)
- Module 20 | Cardiovascular Emergencies | Chapter 18 | EMSP 2420
   (https://axoneducation.instructure.com/courses/260/modules/7370)

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- ti <u>Module 21 | Anatomy and Basic Physiology | Chapter 1 | EMSP 2420</u> (<u>https://axoneducation.instructure.com/courses/260/modules/7339</u>)
- Image: Module 22 | Monitoring and Telemetry | Cardiology Chapter 2 | EMSP 2420

   (https://axoneducation.instructure.com/courses/260/modules/7340)
- Module 23 | Sinus and Atrial Dysrhythmias | Cardiology Chapter 3 | EMSP 2420

   (https://axoneducation.instructure.com/courses/260/modules/7341)
- t Module 24 | Junctional Dysrhythmias | Cardiology Chapter 4 | EMSP 2420 (https://axoneducation.instructure.com/courses/260/modules/7342)
- từ Module 25 | Heart Blocks | Cardiology Chapter 5 | EMSP 2420 (https://axoneducation.instructure.com/courses/260/modules/7343)
- t Module 26 | Ventricular Dysrhythmias | Cardiology Chapter 6 | EMSP 2420 (https://axoneducation.instructure.com/courses/260/modules/7344)
- Module 27 | Funny Looking Beats and Pacemaker Rhythms | Cardiology Chapter 7 | EMSP

   2420 (https://axoneducation.instructure.com/courses/260/modules/7345)
- t Module 28 | Dysrhythmia Review | Cardiology Chapter 8 | EMSP 2420 (https://axoneducation.instructure.com/courses/260/modules/7346)
- Module 29 | Medication Review and Adult Treatment Guidelines | Cardiology Chapter 9 | EMSP

   2420 (https://axoneducation.instructure.com/courses/260/modules/7347)
- từ Module 30 | Dysrhythmia Interpretation Practice | Cardiology Chapter 10 | EMSP 2420 (https://axoneducation.instructure.com/courses/260/modules/7348)
- từ Module 31 | Case Studies | Cardiology Chapter 11 | EMSP 2420 (https://axoneducation.instructure.com/courses/260/modules/7349)
- Image: Transmission of the state of the state
- từ EMSP 2420 | Cardiology | Course Completion Module (https://axoneducation.instructure.com/courses/260/modules/11249)
- từ Modules 33 42 | Syllabus | Trauma Management and Life Support Unit | EMSP 1340 (https://axoneducation.instructure.com/courses/260/modules/7352)
- ☆ Module 33 | Trauma Systems and Mechanism of Injury | Chapter 30 | EMSP 1340 (https://axoneducation.instructure.com/courses/260/modules/7353)
- ★ Module 34 | Bleeding | Chapter 31 | EMSP 1340 (https://axoneducation.instructure.com/courses/260/modules/7354)
- ☆ Module 35 | Soft-Tissue Trauma | Chapter 32 | EMSP 1340 (https://axoneducation.instructure.com/courses/260/modules/7355)

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- 述 Module 36 | Burns | Chapter 33 | EMSP 1340 (https://axoneducation.instructure.com/courses/260/modules/7356)
- tir Module 37 | Face and Neck Trauma | Chapter 34 | EMSP 1340 (https://axoneducation.instructure.com/courses/260/modules/7357)
- Module 38 | Head and Spine Trauma | Chapter 35 | EMSP 1340
   (https://axoneducation.instructure.com/courses/260/modules/7358)
- t Module 39 | Chest Trauma | Chapter 36 | EMSP 1340 (https://axoneducation.instructure.com/courses/260/modules/7359)
- Module 40 | Abdominal and Genitourinary Trauma | Chapter 37 | EMSP 1340

   (https://axoneducation.instructure.com/courses/260/modules/7360)
- ★ Module 41 | Orthopaedic Trauma | Chapter 38 | EMSP 1340 (https://axoneducation.instructure.com/courses/260/modules/7361)
- từ Module 42 | Environmental Emergencies | Chapter 39 | EMSP 1340 (https://axoneducation.instructure.com/courses/260/modules/7362)
- ★ EMSP 1340 | Trauma Management and Life Support | Course Completion Module (https://axoneducation.instructure.com/courses/260/modules/11248)
- <u>Modules 43 47 | Syllabus | Special Populations Unit | EMSP 1350</u> (https://axoneducation.instructure.com/courses/260/modules/7363)
- ☆ Module 43 | Obstetrics | Chapter 42 | EMSP 1350 (https://axoneducation.instructure.com/courses/260/modules/7364)
- ☆ Module 44 | Neonatal Care | Chapter 43 | EMSP 1350 (https://axoneducation.instructure.com/courses/260/modules/7365)
- ☆ Module 45 | Pediatric Emergencies | Chapter 44 | EMSP 1350 (https://axoneducation.instructure.com/courses/260/modules/7366)
- từ Module 46 | Geriatric Emergencies | Chapter 45 | EMSP 1350 (https://axoneducation.instructure.com/courses/260/modules/7367)
- từ Module 47 | Special Populations | Chapter 46 | EMSP 1350 (https://axoneducation.instructure.com/courses/260/modules/7368)
- ★ EMSP 1350 | Special Populations | Course Completion Module (https://axoneducation.instructure.com/courses/260/modules/11247)
- ★ Modules 48 58 | Syllabus | Medical Emergencies Unit | EMSP 2410 (https://axoneducation.instructure.com/courses/260/modules/7369)
- t Module 48 | Neurologic Emergencies | Chapter 19 | EMSP 2410 (https://axoneducation.instructure.com/courses/260/modules/7371)

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- Module 49 | Diseases of the Eyes, Ears, Nose, and Throat | Chapter 20 | EMSP 2410

   (https://axoneducation.instructure.com/courses/260/modules/7372)
- Image: Module 50 | Abdominal and Gastrointestinal Emergencies | Chapter 21 | EMSP 2410

   (https://axoneducation.instructure.com/courses/260/modules/7373)
- Module 51 | Genitourinary and Renal Emergencies | Chapter 22 | EMSP 2410

   (https://axoneducation.instructure.com/courses/260/modules/7374)
- t Module 52 | Gynecologic Emergencies | Chapter 23 | EMSP 2410 (https://axoneducation.instructure.com/courses/260/modules/7375)
- từ Module 53 | Endocrine Emergencies | Chapter 24 | EMSP 2410 (https://axoneducation.instructure.com/courses/260/modules/7376)
- Image: Transmission of the second structure of the sec
- Module 55 | Immunologic Emergencies | Chapter 26 | EMSP 2410
   (https://axoneducation.instructure.com/courses/260/modules/7378)
- ☆ Module 56 | Infectious Diseases | Chapter 27 | EMSP 2410 (https://axoneducation.instructure.com/courses/260/modules/7379)
- từ Module 57 | Toxicology | Chapter 28 | EMSP 2410 (https://axoneducation.instructure.com/courses/260/modules/7380)
- từ Module 58 | Psychiatric Emergencies | Chapter 29 | EMSP 2410 (https://axoneducation.instructure.com/courses/260/modules/7381)
- từ EMSP 2410 | Medical Emergencies| Course Completion Module (https://axoneducation.instructure.com/courses/260/modules/11256)
- Image: Transmission of the system
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- ti Module 59 | Transport Operations | Chapter 47 | EMSP 2330 (https://axoneducation.instructure.com/courses/260/modules/7383)
- t Module 60 | Incident Management and Mass-Casualty Incidents | Chapter 48 | EMSP 2330 (https://axoneducation.instructure.com/courses/260/modules/7384)
- ☆ Module 61 | Vehicle Extrication and Special Rescue | Chapter 49 | EMSP 2330 (https://axoneducation.instructure.com/courses/260/modules/7385)
- ☆ Module 62 | Hazardous Materials | Chapter 50 | EMSP 2330 (https://axoneducation.instructure.com/courses/260/modules/7386)
- từ Module 63 | Terrorism Response | Chapter 51 | EMSP 2330 (https://axoneducation.instructure.com/courses/260/modules/7387)

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- ti <u>Module 64 | Disaster Response | Chapter 52 | EMSP 2330</u> (https://axoneducation.instructure.com/courses/260/modules/7388)
- Image: Module 65 | Crime Scene Awareness | Chapter 53 | EMSP 2330
   (https://axoneducation.instructure.com/courses/260/modules/7389)
- t≊ EMSP 2330 | EMS Operations | Course Completion Module (https://axoneducation.instructure.com/courses/260/modules/11252)
- t Modules 66 68 | Syllabus | Assessment Based Management Unit | EMSP 2140 (https://axoneducation.instructure.com/courses/260/modules/7390)
- ti <u>Module 66 | Responding to the Field Code | Chapter 40 | EMSP 2140</u> (<u>https://axoneducation.instructure.com/courses/260/modules/7391)</u>
- Image: Module 67 | Management and Resuscitation of the Critical Patient | Chapter 41 | EMSP 2140

   (https://axoneducation.instructure.com/courses/260/modules/7392)
- từ Module 68 | Paramedic Readiness Exam on FISDAP (https://axoneducation.instructure.com/courses/260/modules/8802)
- từ Module 69 | Syllabus | Career Lab Unit | EMSP 2145 (https://axoneducation.instructure.com/courses/260/modules/7393)
- <u>EMSP 2145 | Career Lab | Course Completion Module</u>
   (<u>https://axoneducation.instructure.com/courses/260/modules/11254</u>)</u>
- Module 70 | Syllabus | Capstone Lead Internship Unit | EMSP 2250
   (https://axoneducation.instructure.com/courses/260/modules/7394)
- 한 Paramedic Discussions (https://axoneducation.instructure.com/courses/260/modules/7399)
- **这** Appendix: Career Development (https://axoneducation.instructure.com/courses/260/modules/7457)
- **拉** TestPrep (https://axoneducation.instructure.com/courses/260/modules/7401)
- i Simulations (https://axoneducation.instructure.com/courses/260/modules/7402)
- **这** Virtual Ride-Alongs (https://axoneducation.instructure.com/courses/260/modules/7403)

## Grade Calculation

The program-wide Grading Policy and the institution's Grading Scale are included in the EMTB Course Common Syllabus Elements below. Students are encouraged to read these items carefully. Students should be aware that there are program-wide pass-fail elements referred to as Critical Criteria that, if breached, may cause a student to be issued a failing grade for the entire program.

Grades for this individual course will be calculated as follows:

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Description	Percentage
Examinations Final Course Exam	40%
Homework Syllabus Understanding Chapter Objectives Review Chapter Reading Assignments Test Taking Strategies EMTalk Episodes Interactive Lectures Additional Assignments	30%
Quizzes Chapter Quizzes Test Prep	30%
Affect Skills Lab Readiness Exam Clinical/Field Experiences	Pass/Fail

Pass/Fail Affect

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#### Syllabus for 31\_Paramedic Development Course

There are several elements that are not used to calculate your grade, but must be passed in order to achieve an overall passing grade. These include:

- Critical Criteria Labs
- Field Experiences and Clinical Experiences
- Completion of the NREMT Psychomotor Examination (Conducted at Skills Lab)
- Documentation of achievement of an American Heart Association BLS Card

## Course/Program Format and Assignments

This course is presented in an online learning format. A general overview of course assignments is included in this syllabus. Specific and detailed information about all assignments is included in the Learning Management System (LMS). Students who perform poorly on a particular activity may be required to repeat the activity or may be assigned remedial work.

There is no exact schedule for this course. Students are encouraged to move through the course as quickly as they are able; however, the course must be completed by the deadline established by the Maximum Course Duration described below.

Course progress may be judged by 1.) whether the student is meeting the Minimum Activity Policy for the entire program described elsewhere in this syllabus and 2.) whether the Teaching Team believes the student is completing the work in a timeframe which will allow the student to complete the entire program within the Maximum Course Duration described elsewhere in this syllabus. In all cases, if the Teaching Team determines that a student is struggling, then it has the authority to prescribe deadlines for specific assignments or the entire course.

Paramedic Maximum Instructional Deadline (MID)

#### Maximum Instructional Deadline (MID)

The Maximum Instructional Deadline for this course is 60 weeks. Students will have 60 weeks from the cohort start date to complete all online assignments and complete at least one attempt at the Field Internship Student Data Acquisition Project (FISDAP) Comprehensive Readiness Exam.

Students must schedule their Readiness Exam prior to 30 days before their MID. Furthermore, Students must complete an initial attempt at the Readiness Exam prior to their MID.

## Paramedic Maximum Course Duration

#### Maximum Course Duration (MCD)

The Maximum Course Duration for this course is **70 weeks**. The teaching team may extend the MCD at its sole discretion. The decision will be based on the student's demonstration of overall

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#### Syllabus for 31\_Paramedic Development Course

course progress, furloughs awarded due to special life circumstances, scheduled holidays, etc. Students wishing to seek an extension should formally request an extension by submitting a FLEX Request through the link on the Student Resources Page. Extensions will only be considered if requested before the MCD deadline.

Students who remain in the course after the Maximum Instructional Deadline but prior to the end of the Maximum Course Duration may be assigned additional mandatory activities necessary for course completion. While Axon courses each have a Maximum Course Duration, the courses employ adaptive learning technologies and are, therefore, highly personalized for each student. Students may complete the course as rapidly as they are able to meet all requirements. Because this course prior to the end of the Maximum Instructional Deadline or the deadline for the Maximum Course Duration. Causes for course failure include but are not limited to violations of the Minimum Activity Policy, positive results on the required drug- screening, failure to meet compliance deadlines for documentation related to enrollment requirements, dismissal, or other reasons articulated in the course syllabus.

## Attendance Policy

This course is competency-based and is presented in an online format. There are no mandatory weekly sessions. Instead, students may move through the curriculum as quickly as they are able within a set of parameters (See Maximum Course Duration). There are mandatory face-to-face sessions or electronic meetings that must be attended; however, most of these sessions will be scheduled by the student. Attendance at skills labs, clinical experiences, field experiences, and scheduled tutoring sessions will be tracked, and students failing to appear or who arrive late for participation will be required to make up all sessions or missed content.

## Attendance Policy Specific to Skills Labs

Students are required to attend at least two [2] face-to-face Immersive Skills Labs. Skills Labs generally last two days. During these labs, students will learn and practice hands-on skills and ultimately prepare for the NREMT Psychomotor Examination. Students may be required to attend an additional Skills Lab if they have not demonstrated competency in the clinical/field setting. Skills Labs are conducted regularly at the Abilene and Houston class locations. Students must schedule their first Skills Lab within 60 days of their official cohort start date and, when able, based on current offerings, all Skills Labs. Students are encouraged to sign up for the Skills Labs as early in the course as possible to ensure that they are able to attend sessions that are convenient to them in terms of timing. Finally, students are also encouraged to get away from routine responsibilities such as other schooling, work, family obligations, etc., during Skills Labs due to the need to focus intently on the lab instruction. Students may register online by visiting https://www.axoneducation.com/skills/.

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#### Syllabus for 31\_Paramedic Development Course

Students should also arrange for travel and sleeping accommodations as soon as possible after they have registered for their desired session dates.

## Attendance Policy Specific to Clinical/Field Experiences

Students must initiate the scheduling of their clinics within 30 days of the completion of their final Skills Lab. Late arrival to, or failure to attend, a scheduled clinical experience or field experience without notifying Axon in advance will be treated as unprofessional behavior and may result in a breach of Critical Criterion #4 – Positive Affect (see below), and it could result in the student failing the course. It is understood that in rare cases, emergencies happen that could prevent a student from notifying Axon of the late arrival or cancellation in advance. Still, prenotification of late arrival or cancellation is expected in all cases. All missed clinical experiences, or field experiences, must be made up. The Teaching Team may also assign remedial work or additional shifts in cases where shifts or portions of shifts were missed.

## Documenting Field, Lab, and Clinical Experiences

The institution mandates that every student who attends a clinical or field experience write a patient care report, herein referred to as a PCR, for each patient they come into contact with. Each PCR must include completion of the required checkboxes and form selections, as well as a comprehensive narrative in CHART format, as described in the course content.

Towards the end of each clinical and field experience, the student must prompt their preceptor to complete the end-of-shift evaluation requirements, as described in course content, and a preceptor sign-off before leaving the facility on that date. Failure to do so will require the student to complete another clinical/field experience to replace that shift date. The institution will not reach out to the site on the student's behalf to obtain those documents after the fact. The student is prohibited from reaching out to the site on their own, as doing so would put the student at risk for administrative removal from the program.

The institution recognizes that students may not be able to write detailed PCRs while on their clinical or field experience due to reasons including, but not limited to a busy shift. That being said, students will have up to 48 hours from shift end time to write their PCRs for that date and complete the required evaluations for which they are responsible.

### Grading

This course is offered to fulfill the requirements of an Advanced EMT Certification course. A final grade will be issued for the course after completion. There are two crucial characteristics of course grades that the student needs to consider:

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#### Syllabus for 31\_Paramedic Development Course

 While grades for individual courses may be used to identify areas of competency for the Axon program, these grades will not be articulated to Axon Education partners for inclusion in degree programs unless the student successfully completes the entire program and becomes eligible to participate in the National Registry of Emergency Medical Technicians Psychomotor Examinations and Cognitive Examination. Students may not expect articulation of individual course credits in the absence of success in the entire certification program.
 There are programmatic Critical Criteria discussed elsewhere in this document that, if unmet, could result in the issuance of a failing final grade for the program, regardless of the student's success or performance in other aspects of the program. Failure to meet these Critical Criteria for the entire program could effectively negate articulated credit for any course included in the program to other institutions.

This course is competency-based overall, which allows students to improve their performance in most areas. Generally, students are allowed and encouraged to attempt completion of assignments as many times as necessary to achieve a satisfactory grade or as often as desired to improve a grade or enhance competency. In most cases, assignments are considered "open-book," which means that the student is encouraged to use all tools at their disposal to demonstrate success in the task at hand. In certain limited cases, assignments or examinations may be proctored and may include specific limitations on the environment in which the activity is completed or limitations on the tools or resources that may be used as a part of the effort.

### Proctored Assignments

Certain assignments or evaluations must be proctored. Instructions for proctored activities will be included at the time the assignment is given and may include the use of third-party organizations that provide student proctoring. In such a case, the student will be responsible for paying for the proctoring session. The Axon Teaching Team may, at their sole discretion, require that an assignment for a particular student be proctored even if proctoring is not required for the same or similar assignment for all other students.

## Standardized Examinations

Examinations may be conducted using nationally standardized instruments developed and administered by third parties. In these cases, proctoring will be employed, and students may be explicitly restricted in the environment in which the exam will be conducted. Unless otherwise indicated, Axon will allow students one attempt at the nationally standardized examinations without additional costs to students on the first attempt. They will also be required to show satisfactory progress within this product. The student will have three additional attempts at no cost to the student after they have purchased the study tools. Students who are in need of additional attempts

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beyond the initial four attempts for any reason will be required to pay an additional nominal fee for each pair of attempts.

## Final Exams

This course will include a final examination. The exam may or may not require proctoring, and specific requirements will be provided in the Learning Management System. The Teaching Team has the authority to require proctoring on any assignment, including final examinations.

Where appropriate, final examinations may be conducted using nationally standardized exams. These exams, which are administered to thousands of students each year, may provide a more rigorous experience and highly predictive results of student success.

"Cut Scores" are often assigned for final examinations, dictating the minimum score a student must achieve to successfully complete the course or program.

## Simulations and "Ride-Alongs"

These are specific homework assignments within Canvas that will guide students through scenarios giving them direction on how they should respond within the scope of practice of Paramedic in the field. Students will be required to use their critical thinking skills in order to follow along and make decisions as the provider throughout these homework assignments. These assignments are included in the "homework" grade issued within Canvas.

### Skills Labs Grading

Skills Labs are graded on a pass/fail basis. Students may be precluded from proceeding to next steps in this course if they have not demonstrated competency in particular psychomotor skills.

## FISDAP Readiness Exams and Individual Unit Exams

The institution's exam policy permits a maximum of 6 attempts on any single unit within the Paramedic curriculum. Nevertheless, there are instances where the Teaching Team may exercise discretion to grant additional attempts to certain students who have demonstrated the appropriate attitude, aptitude, and academic diligence, indicating a genuine commitment to completing the Paramedic Program in its entirety.

The Teaching Team may, at its discretion, grant extra unit exam attempts to students who meet the specified criteria at no additional cost to the student.

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- The student must have exhausted all six attempts on a single unit from the Paramedic curriculum.
- The student must express their desire to continue in the program to the Student Support Department or the Instructional Support Department.
- · The student must have completed multiple sessions with an Axon Education Tutor.

These additional attempts will be funded by the institution. The Teaching Team will provide the student with specific guidance regarding any requirements or stipulations determined at their discretion.

## Portfolio

Every paramedic student must complete the program-required portfolio of skills and patient care experiences prior to graduation. Each of the relevant skills and patient care encounters must be documented throughout the program. Students are encouraged to be vigilant in pursuing opportunities for skills and patient care experiences to achieve their totals. Students must complete 100% of their portfolio to successfully complete the program.

## Affective Grade

The Axon Education Latin Motto is "Primum Respectum Date" (PREE-mum res-PECT-um DAHtay), which means "first give respect." In other words, Axon is encouraging its students to offer respect to others, even before they earn it. When students choose to show respect to everyone they come in contact with, they will cause others to respect them and create an atmosphere that is less likely to be clouded with bigotry, racism, and inappropriate judgment. Each student should carefully read Critical Criterion #4 – Positive Affect Criterion below. While a student's affect may not directly impact an assignment of a particular numeric or letter grade, inappropriate affect in all educational situations related to the completion of this course has the potential to cause a student to be assigned a failing grade.

### Grading

This course is offered to fulfill the requirements of an EMTB Certification course. A final grade will be issued for the course after completion. There are two crucial characteristics of course grades that the student needs to consider:

1) While grades for individual courses may be used to identify areas of competency for the Axon program, these grades will not be articulated to Axon Education partners for inclusion in degree programs unless the student successfully completes the entire program and becomes eligible to participate in the National Registry of Emergency Medical Technicians Psychomotor Examinations and Cognitive Examination. Students may not expect articulation of individual course credits in the absence of success in the entire certification program.

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#### Syllabus for 31\_Paramedic Development Course

2) There are programmatic Critical Criteria discussed elsewhere in this document that, if unmet, could result in the issuance of a failing final grade for the program, regardless of the student's success or performance in other aspects of the program. Failure to meet these Critical Criteria for the entire program could effectively negate articulated credit for any course included in the program to other institutions.

This course is competency-based overall, which allows students to improve their performance in most areas. Generally, students are allowed and encouraged to attempt completion of assignments as many times as necessary to achieve a satisfactory grade or as often as desired to improve a grade or enhance competency. In most cases, assignments are considered "open-book," which means that the student is encouraged to use all tools at their disposal to demonstrate success in the task at hand. In certain limited cases, assignments or examinations may be proctored. They may include specific limitations on the environment in which the activity is completed or limitations on the tools or resources that may be used as a part of the effort.

## Program Critical Criteria

This course contains several Critical Criteria that, if unmet, could result in the issuance of a failing final grade for the course, regardless of the student's success or performance in other aspects of the course.

- Critical Criterion #1 Compliance Deadline Criterion
  - Students must submit all necessary compliance documentation by the Compliance Date, which is 30 days from the date of their enrollment.
- Critical Criterion #2 Minimum Activity Criterion
  - During the Instructional Period (first 20 weeks or as individually assigned by the Teaching Team), students must log in and complete at least one assignment each week; note that this will not allow a student to finish in the expected timeline. Minimum activity is evaluated each Monday for the preceding seven days (Monday through Sunday). Students attending a Skills Lab or participating in a Clinical Experience or Field Experience may request an exemption for the actual week in which the student was involved in the face-to-face activity.

#### Critical Criterion #3 – Student Responsiveness Criterion

- The Teaching Team may establish that an individual has failed to achieve the Student Responsiveness Criterion by evaluating their pattern of communication. Students are expected to respond to institutional inquiries in a timely manner adequately. A student's adequate and timely responses to written inquiries, text messages, voicemails, and other means of communication from institutional representatives are considered mandatory elements of course progress, even when such inquiries are not directly related to academic performance.
- Critical Criterion #4 Positive Affect Criterion
  - The Teaching Team may establish that an individual has failed to achieve the Positive
     Affect Criterion if a student exhibits ongoing or acutely disruptive affect or unprofessional

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**Axon** Education

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#### Syllabus for 31\_Paramedic Development Course

behavior to fellow students, institutional personnel, clinical partner personnel, or other stakeholders. Satisfactory student progress in this regard is established, among other means, by demonstrating a willingness to work as a productive team member with other students, and especially with clinical partners. This includes dressing, speaking, and acting professionally while in school contexts.

### ADA Statement

At times, it may be necessary for students with special needs or disabilities to receive special or reasonable accommodation. Axon Education will make reasonable accommodations to meet the needs of students with disabilities. To request an accommodation, students should contact Student Support at support@axoneducation.com.

## Min Syllabus Affirmation Requirement

Each student will be required to acknowledge his or her receipt and understanding of this entire syllabus in an assignment in the Canvas Learning Management System.

## A Note to Our Students

We care about your success! If you need help in the course or the program, please reach out to us by email or phone so that we can understand your need and help you. If you need to schedule time for tutoring or emotional support, please do not hesitate to schedule an appointment.

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## Appendices

C	QUIZ		IE
Complete before class st	tarts and turn in to take part in a drav	ving! Answers will be displayed in	n the pre-class presentation.
	Answer the following	BEFORE CLASS BEGINS	5
Your Name:			
	lood Pressure is/		
	ulse or heart rate is betwee		
	ife threats stand for		
	UNRESPONSIVE, instead of		
	ector for Texas EMS School	is Dr. Colton	MD

## **Axon**Education



BLEEDING CONTROL/SHOCK MANAGEMENT		
Candidate: Examiner:		
Date: Signature:	Possible	Points
Actual Time Started:	Points	Awarded
Takes or verbalizes appropriate PPE precautions	1	
Applies direct pressure to the wound	1	-
NOTE: The examiner must now inform candidate that the wound continues to bleed.		
Applies tourniquet	1	
NOTE: The examiner must now inform candidate that the patient is exhibiting signs and symptor	ms of hypoperfusion	).
Property positions the patient	1	
Administers high concentration oxygen	1	1
Initiates steps to prevent heat loss from the patient	1	2.
Indicates the need for immediate transportation	1	1
Actual Time Ended:	TOTAL 7	
Failure to indicate the need for immediate transportation     Failure to manage the patient as a competent EMT     Exhibits unacceptable affect with patient or other personnel     Uses or orders a dangerous or inappropriate intervention You must factually document your rationale for checking any of the above critical items on the re	everse side of this fo	orm.
Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	everse side of this fo	orm.
Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	everse side of this fo	orm.
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Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	everse side of this fo	orm.
Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel	everse side of this fo	orm.



	Registry of Emergency Medical Technicians® Medical Technician Psychomotor Examination		
OXYGEN A	DMINISTRATION BY NON-REBREATHER MASK		
Candidate:	Examiner:		
	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precaution	5	1	Andrucu
Sathers appropriate equipment		1	
Cracks valve on the oxygen tank		1	
Assembles the regulator to the oxygen tank		1	
Opens the oxygen tank valve Checks oxygen tank pressure		1	-
Checks for leaks		1	-
Attaches non-rebreather mask to correct port of	regulator	1	
Turns on oxygen flow to prefill reservoir bag		1	1
Adjusts regulator to assure oxygen flow rate of a		1	
Attaches mask to patient's face and adjusts to fi	snugly	1	-
Actual Time Ended:	T	TOTAL 11	1
Failure to prefill the reservoir bag Failure to adjust the oxygen flow rate to the Failure to ensure a tight mask seal to patie Failure to manage the patient as a compet Exhibits unacceptable affect with patient or Uses or orders a dangerous or inappropria	nt's face ent EMT other personnel	rse side of this for	n.
Failure to adjust the oxygen flow rate to the Failure to ensure a tight mask seal to patie Failure to manage the patient as a compet Exhibits unacceptable affect with patient or Uses or orders a dangerous or inappropria	nt's face ent EMT other personnel le intervention	rse side of this for	n.
Failure to adjust the oxygen flow rate to the Failure to ensure a tight mask seal to patie Failure to manage the patient as a compet Exhibits unacceptable affect with patient or Uses or orders a dangerous or inappropria	nt's face ent EMT other personnel le intervention	rse side of this for	n.
Failure to adjust the oxygen flow rate to the Failure to ensure a tight mask seal to patie Failure to manage the patient as a compet Exhibits unacceptable affect with patient or Uses or orders a dangerous or inappropria	nt's face ent EMT other personnel le intervention	rse side of this for	n.
Failure to adjust the oxygen flow rate to the Failure to ensure a tight mask seal to patie Failure to manage the patient as a compet Exhibits unacceptable affect with patient or Uses or orders a dangerous or inappropria	nt's face ent EMT other personnel le intervention	rse side of this for	n.
Failure to adjust the oxygen flow rate to the Failure to ensure a tight mask seal to patie Failure to manage the patient as a compet Exhibits unacceptable affect with patient or Uses or orders a dangerous or inappropria	nt's face ent EMT other personnel le intervention	rse side of this for	n.
Failure to adjust the oxygen flow rate to the Failure to ensure a tight mask seal to patie Failure to manage the patient as a compet Exhibits unacceptable affect with patient or Uses or orders a dangerous or inappropria	nt's face ent EMT other personnel le intervention	rse side of this for	n.
Failure to adjust the oxygen flow rate to the Failure to ensure a tight mask seal to patie Failure to manage the patient as a compet Exhibits unacceptable affect with patient or Uses or orders a dangerous or inappropria	nt's face ent EMT other personnel le intervention	rse side of this for	n.
Failure to adjust the oxygen flow rate to the Failure to ensure a tight mask seal to patie Failure to manage the patient as a compet Exhibits unacceptable affect with patient or Uses or orders a dangerous or inappropria	nt's face ent EMT other personnel le intervention	rse side of this for	n.
Failure to adjust the oxygen flow rate to the Failure to ensure a tight mask seal to patie Failure to manage the patient as a compet Exhibits unacceptable affect with patient or Uses or orders a dangerous or inappropria	nt's face ent EMT other personnel le intervention	rse side of this for	n.



Candidate: Date: Actual Time Started: Takes or verbalizes appropriate PPE precautions Checks responsiveness Requests additional EMS assistance Checks breathing and pulse simultaneously NOTE: After checking responsiveness, then checking breathing a candidate, "The patient is unresponsive, apneic and has a weak p Opens airway properly	Signature:	Possible Points	Points Awarded
Date: Actual Time Started: Takes or verbalizes appropriate PPE precautions Checks responsiveness Requests additional EMS assistance Checks breathing and pulse simultaneously NOTE: After checking responsiveness, then checking breathing a candidate, "The patient is unresponsive, apneic and has a weak p Opens airway properly	Signature:	Possible Points	Points
Actual Time Started: Takes or verbalizes appropriate PPE precautions Checks responsiveness Requests additional EMS assistance Checks breathing and pulse simultaneously NOTE: After checking responsiveness, then checking breathing a candidate, "The patient is unresponsive, apneic and has a weak p Opens airway properly		Points 1	
Takes or verbalizes appropriate PPE precautions Checks responsiveness Requests additional EMS assistance Checks breathing and pulse simultaneously NOTE: After checking responsiveness, then checking breathing a candidate, "The patient is unresponsive, apneic and has a weak p Opens airway properly		Points 1	
Checks responsiveness Requests additional EMS assistance Checks breathing and pulse simultaneously NOTE: After checking responsiveness, then checking breathing a candidate, "The patient is unresponsive, apneic and has a weak p Opens airway properly			
Requests additional EMS assistance Checks breathing and pulse simultaneously NOTE: After checking responsiveness, then checking breathing a candidate, "The patient is unresponsive, apneic and has a weak p Opens airway properly		1	
Checks breathing and pulse simultaneously NOTE: After checking responsiveness, then checking breathing a candidate, "The patient is unresponsive, apneic and has a weak p Opens airway properly			
NOTE: After checking responsiveness, then checking breathing a candidate, "The patient is unresponsive, apneic and has a weak p Opens airway properly		1	
candidate, "The patient is unresponsive, apneic and has a weak p Opens airway properly		1	
Opens airway properly	Contraction of the line of the second s	xaminer info	ms
	oulse of 60."	7	-
		1	
NOTE: The examiner must now inform the candidate, "The mouth	is full of secretions and vomitus."	1 2	_
Prepares rigid suction catheter		1	
Turns on power to suction device or retrieves manual suction device		1	
Inserts rigid suction catheter without applying suction		-	
Suctions the mouth and oropharynx NOTE: The examiner must now inform the candidate, "The mouth	and aronhaniar are aloar #	1	
Opens the airway manually	and oropharynx are clear.	1 1	
Inserts oropharyngeal airway		1	
NOTE: The examiner must now inform the candidate, "No gag refi	ley is present and the patient accents the		nof "
"Ventilates the patient immediately using a BVM device unattached to		annay aajar	101-
"Award this point if candidate elects to ventilate initially with BVM atta		1	
first ventilation is delivered within 30 seconds.]			
NOTE: The examiner must now inform the candidate that ventilati	ion is being properly performed without o	lifficulty.	-
Re-checks pulse for no more than 10 seconds	2, 1, 2,	1 1	
Attaches the BVM assembly [mask, bag, reservoir] to oxygen [15 L/mir	nute]	1	
Ventilates the patient adequately			
Proper volume to cause visible chest rise (1 point)		2	
-Proper rate [10 - 12/minute (1 ventilation every 5 - 6 seconds)] (1 poi	int)		
Note: The examiner must now ask the candidate, "How would you	u know if you are delivering appropriate v	olumes with	-
each ventilation?"			
Actual Time Ended:	TOTAL	16	-
CRITICAL CRITERIA			
After suctioning the patient, failure to initiate ventilations within 30 s Failure to take or verbalize appropriate PPE precautions	econds or interrupts ventilations for greater th	nan 30 second	s at any time
Failure to suction airway before ventilating the patient			
Suctions the patient for an excessive and prolonged time			
Failure to check responsiveness, then check breathing and pulse s	imultaneously for no more than 10 seconds		
Failure to voice and ultimately provide high oxygen concentration [a			
Failure to ventilate the patient at a rate of 10 - 12/minute (1 ventilat	tion every 5 – 6 seconds)		
Failure to provide adequate volumes per breath [maximum 2 errors	s/minute permissible]		
Insertion or use of any adjunct in a manner dangerous to the patier	nt.		
Failure to manage the patient as a competent EMT			
Exhibits unacceptable affect with patient or other personnel			
Uses or orders a dangerous or inappropriate intervention			
You must factually document your rationale for checking any of t	he above critical items on the reverse sid	le of this forn	1.
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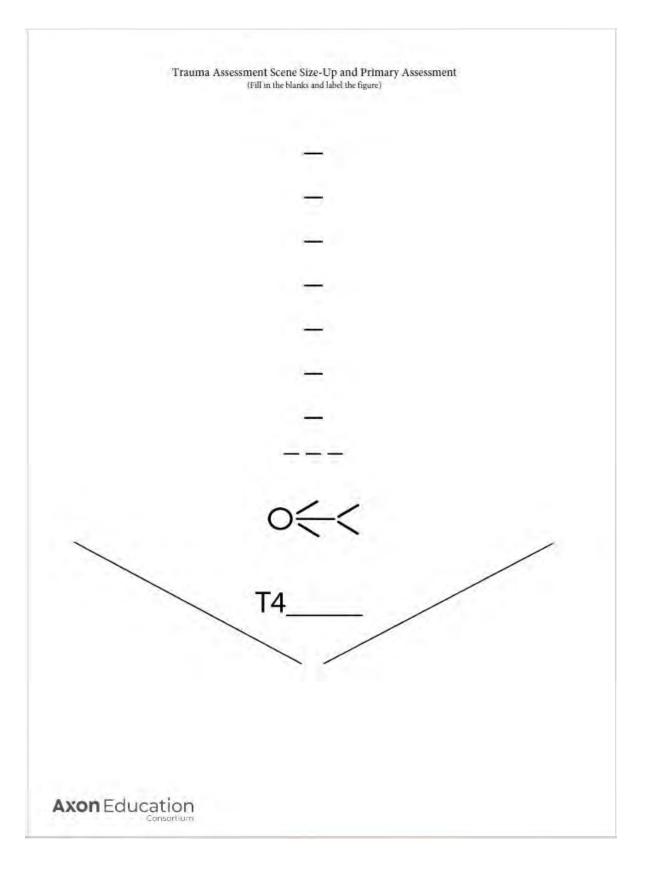
Children An	RREST MANAGEMENT / AED		
Candidate:	Examiner:		
Date:			
	orginatare.	A	
Actual Time Started:		Possible Points	Points Awarded
akes or verbalizes appropriate PPE precautions		1	1
etermines the scene/situation is safe		1	1
hecks patient responsiveness	- (	1	
irect assistant to retrieve AED		1	
equests additional EMS assistance		1	Long et a
hecks breathing and pulse simultaneously		1	
IOTE: After checking responsiveness, then checking xaminer informs candidate, "The patient is unrespon		ids,	
mmediately begins chest compressions [adequate depth a	and rate; allows the chest to recoil completely]	1	
erforms 2 minutes of high-quality, 1-rescuer adult CPR -Adequate depth and rate (1 point) -Correct compression-to-ventilation ratio (1 point) -Allows the chest to recoil completely (1 point) -Adequate volumes for each breath (1 point) -Minimal interruptions of no more than 10 seconds thro	uahout (1 point)	5	
IOTE: After 2 minutes (5 cycles), candidate assesses andidate operates AED.	s patient and second rescuer resumes compres		
urns on power to AED		1	
ollows prompts and correctly attaches AED to patient	ant during du they analyzig	1	
tops CPR and ensures all individuals are clear of the patient		1	
insures that all individuals are clear of the patient and deli- nmediately directs rescuer to resume chest compressions		1	-
ninediately directs rescuer to resume chest compressions			
Actual Time Ended:	g and pulse simultaneously for no more than 10 secc soon as pulselessness is confirmed cuer adult CPR t nt during rhythm analysis and before delivering shock ock delivered sonnel tion	nds	orm.





National Registry of Emergency Med Emergency Medical Technician Psycho			
PATIENT ASSESSMENT/MANAGEN			
Candidate: Examine	er:		
	e:		
	e		_
Scenario # Actual Time Started: Note: Areas denoted by "**" may be integrated within seque	ence of Primary Survey/Resuscitation	Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	Awarded
SCENE SIZE-UP		-	
Determines the scene/situation is safe		1	1
Determines the mechanism of injury/nature of illness Determines the number of patients		1	-
Requests additional EMS assistance if necessary		1	
Considers stabilization of the spine		1	2
PRIMARY SURVEY/RESUSCITATION			
Verbalizes general impression of the patient		1	
Determines responsiveness/level of consciousness Determines chief complaint/apparent life-threats		1	
Airway		2	
-Opens and assesses airway (1 point) -Inserts adjunct as indicated (1 p	oint)	2	
	point) compromise breathing/ventilation (1 point)	4	1
Circulation -Checks pulse (1point) -Assess skin [either skin color, temperature or condition] (1 point) -Assesses for and controls major bleeding if present (1 point) -Initiates shock management [positions patient properly, conserves body heat] (1 point)		4	
Identifies patient priority and makes treatment/transport decision (based upon calculated GCS	3)	1	1
HISTORY TAKING			17 - 11 - 11 - 11 - 11 - 11 - 11 - 11 -
Obtains baseline vital signs [must include BP, P and R] (1 point)		1	
SECONDARY ASSESSMENT			-
Head -Inspects and palpates scalp and ears (1 point) ** -Assesses eyes (1 point) -Inspects mouth**, nose** and assesses facial area (1 point)		3	
-Checks position of trachea (1 point) -Checks jugular veins (1 point)	-Palpates cervical spine (1 point)	3	
-Inspects chest (1 point) -Palpates chest (1 point)	-Auscultates chest (1 point)	3	
Abdomen/pelvis** -Inspects and palpates abdomen (1 point) -Assesses pelvis (1 point) -Verbalizes assessment of genitalia/perineum as needed (1 point)		3	
Lower extremities"		2	
<ul> <li>Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/le Upper extremities</li> </ul>	g)		
-Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/a	m)	2	
-Inspects and palpates posterior thorax (1 point) -Inspects and palpates lumbar ar	ad buttooks amos (1 point)	2	
Manages secondary injuries and wounds appropriately	lo buttocks areas (1 point)	1	
REASSESSMENT			
Demonstrates how and when to reassess the patient		1	
Actual Time Ended: CRITICAL CRITERIA	TOTAL	42	
Failure to initiate or call for transport of the patient within 10 minute time limit Failure to take or verbalize appropriate PPE precautions Failure to determine scene safety Failure to obtermine scene safety Failure to voice and provide spinal protection when indicated Failure to voice and ultimately provide high concentration oxygen Failure to assess/provide adequate verbilation Failure to assess/provide adequate verbilation Failure to differentiate patient's need for immediate transportation versus continued ass Performs other assessment before assessing/treating threats to airway, breathing, and Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention You must factually document your rationale for checking any of the above critical item	essment/treatment at the scene sirculation		
9 2016 by the National Registry of Emergency Medical Technicians, Inc., Columbus, OH Ill materials subject to this copyright may be photocopied for the non-commercial purpose of educ	ational or scientific advancement.		e201/10-10







National Registry of Emergency Medical Technicians® **Emergency Medical Technician Psychomotor Examination** 

#### PATIENT ASSESSMENT/MANAGEMENT - MEDICAL

Candidate:		Examiner:		
Date:		Signature:		
Scenario #				
Actual Time Started:	1		Possible Points	Points Awarded
Takes or verbalizes approp	riate PPE precautions		1	T
SCENE SIZE-UP				
Determines the scene/situa	ation is safe		1	
Determines the mechanism	n of injury/nature of illness		1	1
Determines the number of	patients		1	-
Requests additional EMS a	ssistance if necessary		1 1 1	
Considers stabilization of th	ne spine		1	
PRIMARY SURVEY/RESU	JSCITATION		0	Ċ.
Verbalizes the general imp	ression of the patient		1	
	s/level of consciousness (AVPU)		1	
Determines chief complaint	Vapparent life-threats		1	
Assesses airway and breat	hing		3	
-Assessment (1 point)	-Assures adequate ventilation (1 p	oint) -Initiates appropriate oxygen therapy (1 point)		-
Assesses circulation -Assesses/controls major b	leeding (1 point) color, temperature or condition] (1 poir	-Checks pulse (1 point)	3	
	d makes treatment/transport decision	it)	1	-
HISTORY TAKING	a makes beautenebansport decision			-
History of the present illnes	5		1	
-Onset (1 point)	-Quality (1 point)	-Severity (1 point)	1.1.1	
-Provocation (1 point)	-Radiation (1 point)	-Time (1 point)	8	1.0
-Clarifying questions of ass	ociated signs and symptoms related to			
Past medical history				
-Allergies (1 point)	-Past pertinent history (1 poi	nt) -Events leading to present illness (1 point)	5	
-Medications (1 point)	-Last oral intake (1 point)			
SECONDARY ASSESSM	ENT			
Assesses affected body pa	rt/system	A REAL PROPERTY AND A REAL	1000	
-Cardiovascular	-Neurological -Integ	gumentary -Reproductive	5	
-Pulmonary	-Musculoskeletal -GI/G	U -Psychological/Social		
VITAL SIGNS				
-Blood pressure (1 point)	-Pulse (1 point)	-Respiratory rate and quality (1 point each)	4	
States field impression of p	atient		1	-
Interventions [verbalizes pr	oper interventions/treatment]		1	
REASSESSMENT				
Demonstrates how and wh	en to reassess the patient to determine	changes in condition	1.	50000
Provides accurate verbal re			1	1
Actual Time Ended:		TOTAL	42	

CRITICALCRITERIA

\_ Failure to initiate or call for transport of the patient within 15 minute time limit

Failure to take or verbalize appropriate PPE precautions

Failure to determine scene safety before approaching patient

Failure to voice and ultimately provide appropriate oxygen therapy

Failure to assess/provide adequate ventilation

Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock

\_\_\_\_\_Failure to differentiate patient's need for immediate transportation versus continued assessment or treatment at the source

Performs secondary examination before assessing and treating threats to airway, breathing and circulation

Orders a dangerous or inappropriate intervention

Failure to provide accurate report to arriving EMS unit

Failure to manage the patient as a competent EMT

Exhibits unacceptable affect with patient or other personnel

Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

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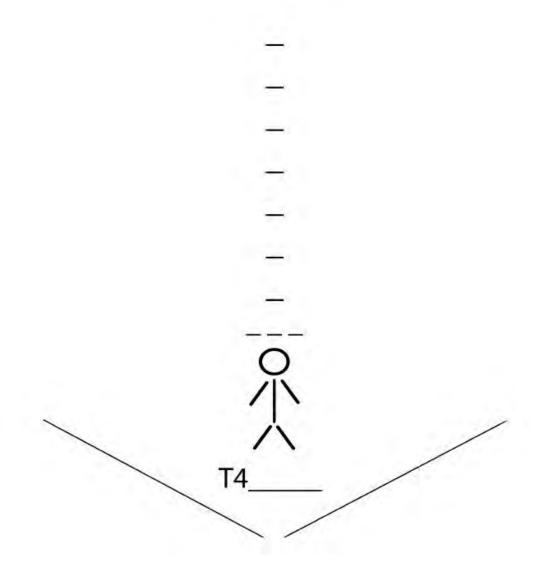
Updated 7/10/2024

## **Axon** Education

e202/10-16

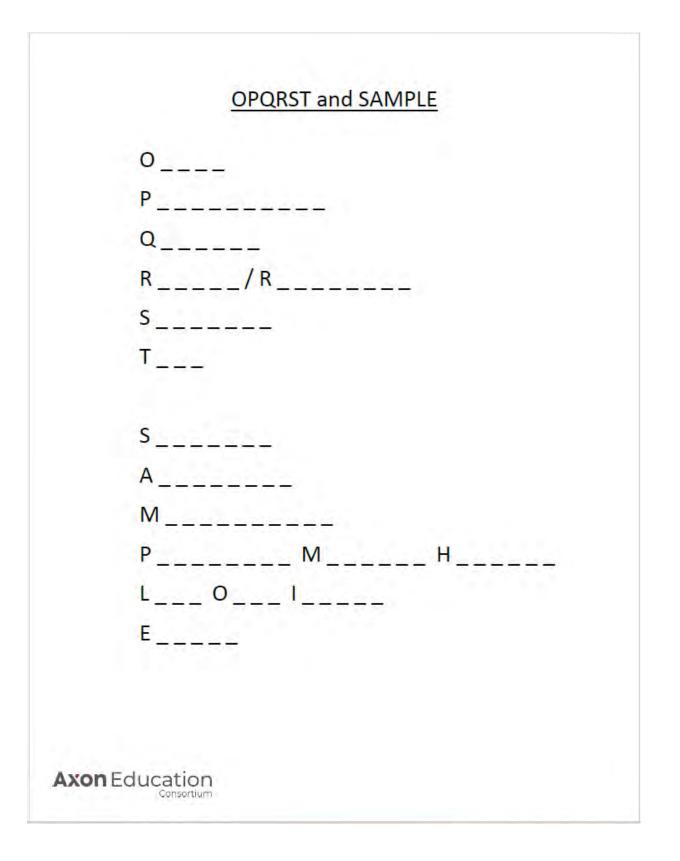


Medical Assessment Scene Size-Up and Primary Assessment (Fill in the Blanks and Label the Figure)



Axon Education







PARAMEDIO	SKILLS SESSION 1 LAB
Name:	Date: City:
Observer(s):	/
Evaluator(s):	/
BASIC S	KILLS PRACTICE
Insert NPA.	Lift and transfer a patient to the
Performed 1	stretcher.
Insert OPA.	Performed 1
Performed 1	Splint a suspected long bone injury.
Dorform oral austioning	Derformed 1

Perform oral suctioning. Performed 1 \_\_\_\_ Perform FBAO – adult. Witness: Performed 1 Perform FBAO – infant. Performed 1 Administer O2 by NC. Performed 1 \_ Administer O2 by face mask. Performed 1 Ventilate an adult with BVM. Performed 1 Ventilate a pediatric with BVM. Performed 1 \_ Ventilate a neonate with BVM. Performed 1 Apply a tourniquet. Performed 1 Apply a cervical collar. Performed 1 Perform spine motion restriction. Performed 1 \_\_\_\_

Performed 1 \_ Splint a suspected joint injury. Performed 1 Stabilize an impaled object. Performed 1 Dress and bandage a soft tissue injury. Performed 1 \_\_\_\_ Apply an occlusive dressing to open wound to the thorax. Performed 1 Perform uncomplicated obstetric delivery. Performed 1 \_ Assess vital signs. Performed 1 Perform a Comprehensive Physical Assessment Performed 1 Perform CPR - adult. Performed 1 \_ Perform CPR - pediatric. Performed 1 Perform CPR - neonate. Performed 1 \_\_\_\_\_



#### PARAMEDIC SKILLS SESSION 1 LAB

Name:	_ Date:	_ City:
Observer(s):	/	
Evaluator(s):	/	

## PARAMEDIC SKILLS PRACTICE

Establish IV access.					
Performed 1 Performed 2 Administer IV infusion medication.					
Administer IV Infu	sion medication.				
Performed 1 Performed 2					
Administer IV bolu	us medication.				
Performed 1	Performed 2				
Administer IM injection.					
Performed 1	Performed 2				
Establish IO access.					
Performed 1	Performed 2				
Performed 3	Performed 4				
Perform PPV with	BVM.				
Performed 1	Performed 2				
Performed 3	Performed 4				
Perform oral endotracheal intubation.					
Performed 1	Performed 2				
Perform endotracheal suctioning.					
Performed 1	Performed 2				
Perform FBAO usi	ing Magill forceps.				
Performed 1 Performed 2					

Perform cricothyrotomy. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_ Insert supraglottic airway. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_ Perform needle decompression to the chest. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_ Perform synchronized cardioversion. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_ Perform defibrillation. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_ Perform transcutaneous pacing. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_ Perform chest compressions. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_ Pediatric intubation. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_ Nasotracheal Intubation. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_





	PARAMEDIC SKILLS	SESSI	ON 2 LAB
Na	me:		Date:
Instru	ictor:		Location:
_	FORMATIVE SIMULATED PARAMED		
	Obstetric delivery with normal new		care
_	Scenario # Scenario #		
Ц	Complicated delivery – Prolapsed	cord.	
_	Scenario #		
	Complicated delivery – Breech Pre	esenta	ition.
_	Scenario #		
	Distressed neonate.		
_	Scenario # Scenario #		
	Cardiac arrest.		
	Scenario # Scenario #		
	Administer IV infusion		Insert supraglottic airway.
	medication.		Scenario #
	Scenario #		Scenario #
	Establish IO Access.		Scenario #
	Scenario # Perform PPV with BVM		Scenario # Scenario #
	Scenario #	п	Perform needle decompression
	Scenario #	-	of the chest.
	Scenario #		Scenario #
	Scenario #		Perform synchronized
_	Scenario #		cardioversion.
	Perform oral endotracheal intubation.		Scenario # Perform defibrillation.
	Scenario #	Ц	Scenario #
	Scenario #		Perform transcutaneous pacing.
	Scenario #		Scenario #
	Scenario #		Perform chest compressions.
_	Scenario #		Scenario #
	Perform endotracheal suctioning. Scenario #		
_	Perform FBAO removal using		
<u> </u>	Magill forceps.		
	Scenario #		
	Perform cricothyrotomy.		
	Scenario #		

Updated 7/10/2024



PARAI	MEDIC SKILLS SESSION 3 LAB
Name:	Date:
Instructor:	Location:
SUMMATIVE SIMULA	ATED PARAMEDIC SCENARIOS WITH SKILLS
Pediatric trauma.	
Scenario #	
Adult trauma.	
Scenario #	
Psychiatric	
Scenario #	
Complicated delivery	– Prolapsed cord.
Scenario #	
Complicated delivery	<ul> <li>Breech Presentation.</li> </ul>
Scenario #	
Distressed neonate.	
Scenario #	
	or complaints – Cardiac related chest pain.
Scenario #	
Cardiac arrest.	
Scenario #	
	pathologies or complaints - Geriatric stroke.
Scenario #	
	ies or complaints – Geriatric respiratory
distress/failure.	
Scenario #	
	ies or complaints – Pediatric respiratory
distress/failure.	
Scenario #	
	ions or complaints – Geriatric sepsis.
Scenario #	



#### PARAMEDIC SKILLS SESSION 3 LAB

 Name:
 Date:

 Instructor:
 Location:

### SUMMATIVE SIMULATED PARAMEDIC SCENARIOS WITH SKILLS

- Administer IV infusion medication.
- Scenario #\_\_\_\_ Establish IO Access. Scenario #
- Perform PPV with BVM
   Scenario #\_\_\_\_
   Scenario #\_\_\_\_
   Scenario #\_\_\_\_
  - Scenario #\_\_\_\_\_
  - Scenario #\_\_\_\_\_
- Perform oral endotracheal intubation.
   Scenario #\_\_\_\_\_
   Scenario #\_\_\_\_\_
  - Scenario #\_\_\_\_\_
  - Scenario #\_\_\_\_\_
  - Scenario #
- Perform endotracheal suctioning.
   Scenario #\_\_\_\_\_
- Perform FBAO removal using Magill forceps. Scenario #\_\_\_\_\_

- Perform cricothyrotomy.
   Scenario #\_\_\_\_\_
- Insert supraglottic airway.
   Scenario #\_\_\_\_\_
   Scenario #\_\_\_\_\_
  - Scenario #\_\_\_\_\_
  - Scenario #\_\_\_\_\_
  - Scenario #\_\_\_\_\_
- Perform needle decompression of the chest.
   Scenario #\_\_\_\_\_
- Perform synchronized cardioversion.
   Scenario #
- Perform defibrillation.
   Scenario #\_\_\_\_\_
- Perform transcutaneous pacing.
   Scenario #\_\_\_\_\_
- Perform chest compressions.
   Scenario #\_\_\_\_\_



## National Registry of Emergency Medical Technicians Psychomotor Evaluation: Bleeding Control/Shock Management

BLEEDING CONTROL/SHOCK MANAGEMENT	r		
BLEEDING CONTROL/SHOCK MANAGEMENT			
Candidate: Examiner:			
Date: Signature:			
Actual Time Started:		ssible oints	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Applies direct pressure to the wound		1	
NOTE: The examiner must now inform candidate that the wound continues to bleed.			
Applies toumiquet		1	
NOTE: The examiner must now inform candidate that the patient is exhibiting signs and s	vmptoms of hypopen	fusion.	-
Properly positions the patient		1	
Administers high concentration oxygen		1	
Initiates steps to prevent heat loss from the patient		1	
Indicates the need for immediate transportation		1	
Actual Time Ended:	TOTAL	7	1
Failure to control hemorrhage using correct procedures in a timely manner Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention You must factually document your rationale for checking any of the above critical items or	n the reverse side of 1	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	п.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	п.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	π





National Registry of Emergency Medical Technicians Psychomotor Evaluation: Oxygen Administration by Non-Breather Mask



National Registry of Emergency Medical Technicians® Emergency Medical Technician Psychomotor Examination

**OXYGEN ADMINISTRATION BY NON-REBREATHER MASK** 

Candidate: Date: \_ Examiner: \_\_\_\_\_\_ Signature: \_\_\_\_\_

Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Gathers appropriate equipment		1	
Cracks valve on the oxygen tank		1	
Assembles the regulator to the oxygen tank		1	
Opens the oxygen tank valve		1	
Checks oxygen tank pressure		1	
Checks for leaks		1	
Attaches non-rebreather mask to correct port of regulator		1	
Turns on oxygen flow to prefill reservoir bag		1	(
Adjusts regulator to assure oxygen flow rate of at least 10 L/minute		1	1
Attaches mask to patient's face and adjusts to fit snugly		1	
Actual Time Ended:	TOTAL	11	

CRITICAL CRITERIA

\_\_\_\_\_ Failure to take or verbalize appropriate PPE precautions

\_\_\_\_\_ Failure to assemble the oxygen tank and regulator without leaks

\_\_\_\_\_ Failure to prefill the reservoir bag

Failure to adjust the oxygen flow rate to the non-rebreather mask of at lease 10 L/minute

\_\_\_\_ Failure to ensure a tight mask seal to patient's face

\_\_\_\_\_ Failure to manage the patient as a competent EMT

Exhibits unacceptable affect with patient or other personnel

\_\_\_\_\_ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

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e204/10-16





## National Registry of Emergency Medical Technicians Psychomotor Evaluation: BVM Ventilation of an Apneic Adult

BVM VENTILA	TION OF AN APNEIC ADULT PATIENT		
Candidate:	Examiner:		
Date:	Signature:	A	Sec. 1
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Checks responsiveness		1	
Requests additional EMS assistance		1	
Checks breathing and pulse simultaneously	a basedbing and sules for an area does 10 accords	1	
candidate. "The patient is unresponsiveless, then checkin candidate. "The patient is unresponsive, appeic and	ng breathing and pulse for no more than 10 seconds, e	xammer infor	ms
Opens airway properly	has a weak pulse of 60.	1 1	
NOTE: The examiner must now inform the candidate	"The mouth is full of secretions and vomitus "	1 .	
Prepares rigid suction catheter	-, The model is fail of ocoreacity and Format.	1 1	-
Turns on power to suction device or retrieves manual su	iction device	1	
nserts rigid suction catheter without applying suction		1	
Suctions the mouth and oropharynx	the second se	1.	
NOTE: The examiner must now inform the candidate	e, "The mouth and oropharynx are clear."		
Opens the airway manually		1	
nserts oropharyngeal airway	A REAL PROPERTY AND A REAL	1	
NOTE: The examiner must now inform the candidate	e, "No gag reflex is present and the patient accepts the	airway adjur	nct."
"Ventilates the patient immediately using a BVM device			-
	with BVM attached to reservoir and oxygen so long as	1	
first ventilation is delivered within 30 seconds.]			-
	e that ventilation is being properly performed without o		-
Re-checks pulse for no more than 10 seconds		1	
Attaches the BVM assembly [mask, bag, reservoir] to o	(ygen [15 L/minute]	1	-
Ventilates the patient adequately			A
Proper volume to cause visible chest rise (1 point) Proper rate [10 – 12/minute (1 ventilation every 5 – 6 s	seeds)] (f point)	2	
	ow would you know if you are delivering appropriate v	nlumes with	-
each ventilation?"	ow would you know it you are derivering appropriate i	ounes mu	-
Actual Time Ended:	TOTAL	16	
CRITICAL CRITERIA			-
After suctioning the patient, failure to initiate ventilati	ons within 30 seconds or interrupts ventilations for greater th	an 30 second	s at any time
Failure to take or verbalize appropriate PPE precaut	tions		
Failure to suction airway before ventilating the patie	nt		
Suctions the patient for an excessive and prolonged			
	ing and pulse simultaneously for no more than 10 seconds		
Failure to voice and ultimately provide high oxygen of	The second se		
Failure to ventilate the patient at a rate of 10 – 12/m			
Failure to provide adequate volumes per breath [ma			
Insertion or use of any adjunct in a manner dangero	us to the patient		
Failure to manage the patient as a competent EMT			
Exhibits unacceptable affect with patient or other pe Uses or orders a dangerous or inappropriate interve			
You must factually document your rationale for chee	cking any of the above critical items on the reverse sid	le of this forn	1

Patient National Registry of Emergency Medical Technicians Psychomotor Evaluation: Cardiac Arrest Management [AED]



National Registry of Emergency Medical Technicians<sup>®</sup> Emergency Medical Technician Psychomotor Examination

#### CARDIAC ARREST MANAGEMENT / AED

Examiner
LAdminer.

Date: Signature:		
Actual Time Started:	Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions	1	l
Determines the scene/situation is safe	1	
Checks patient responsiveness	1	3
Direct assistant to retrieve AED	1	
Requests additional EMS assistance	1	1.000
Checks breathing and pulse simultaneously	1	-
NOTE: After checking responsiveness, then checking breathing and pulse for no more than 10 seco examiner informs candidate, "The patient is unresponsive, apneic and pulseless."	onds,	
Immediately begins chest compressions [adequate depth and rate; allows the chest to recoil completely]	1	
Performs 2 minutes of high-quality, 1-rescuer adult CPR -Adequate depth and rate (1 point) -Correct compression-to-ventilation ratio (1 point) -Allows the chest to recoil completely (1 point) -Adequate volumes for each breath (1 point) -Adequate volumes for each breath (1 point) -Minimal interruptions of no more than 10 seconds throughout (1 point)	5	
NOTE: After 2 minutes (5 cycles), candidate assesses patient and second rescuer resumes compre- candidate operates AED.	ssions while	
Turns on power to AED	1	
Follows prompts and correctly attaches AED to patient	1	
Stops CPR and ensures all individuals are clear of the patient during rhythm analysis	1	i
Ensures that all individuals are clear of the patient and delivers shock from AED	1	1
Immediately directs rescuer to resume chest compressions	1	1
Actual Time Ended: TOTAL	. 17	

#### Critical Criteria

Candidate:

Failure to take or verbalize appropriate PPE precautions

Failure to check responsiveness, then check breathing and pulse simultaneously for no more than 10 seconds Failure to immediately begin chest compressions as soon as pulselessness is confirmed

- Failure to demonstrate acceptable high-quality, 1-rescuer adult CPR
- Interrupts CPR for more than 10 seconds at any point Failure to correctly attach the AED to the patient
- Failure to operate the AED properly Failure to deliver shock in a timely manner
- Failure to ensure that all individuals are clear of patient during rhythm analysis and before delivering shock [verbalizes "All clear" and observes]
- Failure to immediately resume compressions after shock delivered
- Failure to manage the patient as a competent EMT
- Exhibits unacceptable affect with patient or other personnel
- Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

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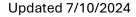
PATIENT ASSESSMENT/MANAGEMENT - TRAUMA Candidate: Examiner: Date: Signature: Date:	sitation Possible Points	
Date:	sitation Possible Points	
Scenario #	Points           1           4           1	
Note:         Areas denoted by "**" may be integrated within sequence of Primary Survey/Result           Takes or verbalizes appropriate PPE precautions	Points           1           4           1	
akes or verbalizes appropriate PPE precautions         CCENE SIZE-UP         Determines the scene/situation is safe         Determines the mechanism of injury/nature of illness         Determines the number of patients         Requests additional EMS assistance if necessary         Considers statilization of the spine         RIMARY SURVEY/RESUSCITATION         Returns scher complaint/apparent life-threats         Virway         -Opens and assesses ainway (1 point)         -Inserts adjunct as indicated (1 point)         -Assess breathing (1 point)         -Assess breathing (1 point)         -Assess skin (either skin color, temperature or condition) (1 point)         -Assess skin (either skin color, temperature or condition) (1 point)         -Assess skin (either skin color, temperature or condition) (1 point)         -Assess skin (either skin color, temperature or condition) (1 point)         -Assess skin (either skin color, temperature or condition) (1 point)         -Assess skin (either skin color, temperature or condition) (2 point)         -Assess skin (either skin color, temperature or condition) (2 point)         -Assess skin (either skin color, temperature or condition) (2 point)         -Instates patient priority and makes treatment/transport decision (based upon calculated GCS)         BSTORY TAKING         Detains baseline vital signs (must include BP, P and	Points           1           4           1	
CENE SIZE-UP       Control is a fewer in the scene/situation is safe         Vetermines the mechanism of injury/nature of illness       Vetermines the mechanism of injury/nature of illness         Vetermines the number of patients       Vetermines the number of patients         Vetermines the number of patients       Vetermines responsiveness/level of consciousness         Vetermines responsiveness/level of consciousness       Vetermines chief complaint/apparent life-threats         Vetermines chief complaint/apparent life-threats       Vetermines chief complaint/apparent life-threats         Vetermines the form plaint/apparent life-threats       Vetermines chief complaint/apparent life-threats         Vetermines the form plaint/apparent life-threats       Vetermines chief complaint/apparent life-threats         Vetermines the form plaint/apparent life-threats       Vetermines chief complaint/apparent life-threats         Vetermines the form plaint/apparent life-threats       Vetermines chief complaint/apparent life-threats         Vetermines the form plaint apparent life-threats       Vetermines chief complaint/apparent life/threats         Vetermines the form plaint apparent life-threats       Vetermines chief complaint/apparent life/threats         Vetermines the form plaint apparent life/threats       Vetermines chief complaint/apparent life/threats         Vetermines the form plaint appendiate complaint apparent (1 point)       -Assesses for and controls major bleeding if present (1 point)         <	ion (1 point)	
etermines the scene/situation is safe  etermines the mechanism of injury/nature of illness  etermines the mumber of patients  etermines the number of patients  etermines stabilization of the spine  RIMARY SURVEY/RESUSCITATION  erbalizes general impression of the patient  etermines chief complaint/apparent life-threats  inway  -Opens and assesses airway (1 point) -Inserts adjunct as indicated (1 point) -Instress breathing (1 point) -Instress adequate ventilation (1 point) -Initiates appropriate oxygen therapy (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assesses for and controls major bleeding if present (1 point) -Insteads bookt management [cositions patient properly, conserves body heat] (1 point) Etermines bookt management [cositions patient properly, conserves body heat] (1 point) Etermines bookt management [cositions patient properly, conserves body heat] (1 point) Etermines the statis statises [must include BP, P and R] (1 point) -Inspects and palpates scalp and ears (1 point) -Checks jugular veins (1 point) -Inspects chest (1 point) -Assesses eyes (1 point) -Inspects chest (1 point) -Assesses palvis (1 point) -Assesses palvis (1 point) -Inspects chest (1 point) -Assesses palvis (1 point) -Inspects chest (1 point) -Assess	1 1 1 1 1 2 ion (1 point) 4	
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<ul> <li>-Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/leg) pper extremities</li> </ul>	3	
pper extremities	2	
	2	1
osterior thorax, lumbar and buttocks** -Inspects and palpates lumbar and buttocks areas (1 point) -Inspects and palpates lumbar and buttocks areas (1 point)	2	1
lanages secondary injuries and wounds appropriately	1	-
EASSESSMENT emonstrates how and when to reassess the patient	1	1
	3. C. D. R	-
ctual Time Ended:	TOTAL 42	
RITICAL CRITERIA Failure to initiate or call for transport of the patient within 10 minute time limit		
Failure to take or verbalize appropriate PPE precautions		
Failure to determine scene safety Failure to assess for and provide spinal protection when indicated		
Failure to voice and ultimately provide high concentration oxygen		
Failure to assess/provide adequate ventilation		
Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock Failure to differentiate patient's need for immediate transportation versus continued assessment/treatment at the soc	ne	
Performs other assessment before assessing/treating threats to airway, breathing and circulation		
Failure to manage the patient as a competent EMT		
Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention		
	s form.	

## Assessment/Management - Trauma

## Assessment/Management - Medical



PATIENT ASSESSMENT/MANAGEMENT – MEDICAL		
Candidate: Examiner:		
Date: Signature:		_
Scenario #		-
Actual Time Started:	Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions	1	
SCENE SIZE-UP		1
Determines the scene/situation is safe	1	-
Determines the mechanism of injury/nature of illness Determines the number of patients	1	-
Requests additional EMS assistance if necessary	1	-
Considers stabilization of the spine	1	-
PRIMARY SURVEY/RESUSCITATION		-
Verbalizes the general impression of the patient	1	
Determines responsiveness/level of consciousness (AVPU)	1	
Determines chief complaint/apparent life-threats	1	
Assesses airway and breathing	3	
-Assessment (1 point) -Assures adequate ventilation (1 point) -Initiates appropriate oxygen therapy (1	point) 3	
Assesses circulation		1.00
-Assesses/controls major bleeding (1 point) -Checks pulse (1 point) -Assesses skin [either skin color, temperature or condition] (1 point)	3	
Identifies patient priority and makes treatment/transport decision	1	-
HISTORY TAKING		1
History of the present illness		1
-Onset (1 point) -Quality (1 point) -Severity (1 point)	10.00	
-Provocation (1 point) -Radiation (1 point) -Time (1 point)	8	
-Clarifying questions of associated signs and symptoms related to OPQRST (2 points)		
Past medical history		
-Allergies (1 point) -Past pertinent history (1 point) -Events leading to present illness (1 point)	t) 5	
-Medications (1 point) -Last oral intake (1 point) SECONDARY ASSESSMENT		
Assesses affected body part/system		1
-Cardiovascular -Neurological -Integumentary -Reproductive	5	
-Pulmonary -Musculoskeletal -GI/GU -Psychological/Social		
VITAL SIGNS		
-Blood pressure (1 point) -Pulse (1 point) -Respiratory rate and quality (1 point eac	sh) 4	
States field impression of patient	1	-
Interventions [verbalizes proper interventions/treatment]	1	G
REASSESSMENT		
Demonstrates how and when to reassess the patient to determine changes in condition	1	
Provides accurate verbal report to arriving EMS unit	1	-
Actual Time Ended: T	OTAL 42	1.0
CRITICALCRITERIA		
Failure to initiate or call for transport of the patient within 15 minute time limit		
Failure to take or verbalize appropriate PPE precautions		
Failure to determine scene safety before approaching patient		
Failure to voice and ultimately provide appropriate oxygen therapy Failure to assess/provide adequate ventilation		
Failure to assess/provide adequate ventilation Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock		
Failure to differentiate patient's need for immediate transportation versus continued assessment or treatment at the	COOTING.	
Performs secondary examination before assessing and treating threats to airway, breathing and circulation	Source	
Orders a dangerous or inappropriate intervention		
Failure to provide accurate report to arriving EMS unit		
Failure to manage the patient as a competent EMT		
Fight he consistently affect with preferring of the presence of		
Exhibits unacceptable affect with patient or other personnel		
Uses or orders a dangerous or inappropriate intervention		







## Clinical and Field Portfolio for Advanced EMT and Paramedic Students

CoAEMSP Student Minimum Competency (SMC)	Column 1 Formative Exposure in Clinical or Field Experience Conducts patient assessment, performs motor skills if appropriate and available, and assists with development of a management plan in patient exposures with some assistance for evaluation	Column 2 Exposure in Clinical or Field Experience and Capstone Field Internship	Total	Minimum Recommendations by Age* (*included in the total)
Pediatric patients with pathologies or complaints				Minimum Age Exposure
				2 Neonate (birth to 30 days)
			2 Infant 2 (1 mo - 12 mos)	
	15		30	2 Toddler 2 (1 to 2 years)
	15	15	50	2 Preschool 2 (3 to 5 years)
				School-Aged/ 2 Preadolescent (6 to 12 years)
				2 Adolescent (13 to 18 years)
Adult	30	30	60	(19 to 65 years of age)
Geriatric	9	9	18	(older than 65 years of age)
Totals:	54	54	108	





CoAEMSP Student Minimum Competency by Pathology or Complaint	Simulation	Column 1 Formative Exposure in Clinical or Field Experience Conducts patient assessment (primary and secondary assessment) and performs motor skills if appropriate and available, and assists with development of a management plan on a <u>patient</u> with some assistance for evaluation.	Column 2 Exposure in Clinical or Field Experience/Capstone Field Internship Conducts a patient assessment and develops a management plan for evaluation on each patient with minimal to no assistance	Total Formative & Competency Evaluations by Condition or Complaint
Trauma	Minimum of one (1) pediatric and one (1) adult trauma simulated scenario must be successfully completed prior to capstone field internship.	18	9	27
Psychiatric/ Behavioral	Minimum of one (1) psychiatric simulated scenario must be successfully completed prior to capstone field internship.	12	6	18
Obstetric delivery with normal newborn care	N/A	2 (simulation permitted)		
Complicated obstetric delivery (e.g., breech, prolapsed cord, shoulder dystocia, precipitous delivery, multiple births, meconium staining, premature birth, abnormal presentation, postpartum hemorrhage)	Minimum of two (2) complicated obstetric delivery simulated scenarios must be successfully completed prior to capstone field internship including a prolapsed cord and a breech delivery.	2 (simulation permitted)	2 (simulation permitted)	6
Distressed neonate (birth to 30 days)	Minimum of one (1) distressed neonate following delivery simulated scenario must be successfully completed prior to capstone field internship.	2 (simulation permitted)	2 (simulation permitted)	4

	Totals:	88	46	134
Other medical conditions or complaints (e.g., gastrointestinal, genitourinary, gynecologic, reproductive pathologies, or abdominal pain complaints, infectious disease, endocrine disorders or complaints (hypoglycemic, DKA, HHNS, thyrotoxic crisis, myxedema, Addison's, Cushing's), overdose or substance abuse, toxicology, hematologic disorders, non-traumatic musculoskeletail disorders, diseases of the eyes, ears, nose, and throat)	Minimum of one (1) geriatric sepsis simulated scenario must be successfully completed prior to capstone field internship.	12	6	18
Respiratory pathologies or complaints (e.g., respiratory distress, respiratory failure, respiratory arrest, acute asthma episode, lower respiratory infection)	Minimum of one (1) pediatric and one (1) geriatric respiratory distress/failure simulated scenario must be successfully completed prior to capstone field internship.	8	4	12
Medical neurologic pathologies or complaints (e.g., transient ischemic attack, stroke, syncope, or altered mental status presentation)	Minimum of one (1) geriatric stroke simulated sconario must be successfully completed prior to capstone field internship.	8	4	12
Cardiac dysrhythmias	N/A	10	6	16
Cardiac arrest	Minimum of one (1) cardiac arrest simulated scenario must be successfully completed prior to capstone field internship.	2 (simulation permitted)	1 (simulation permitted)	3
Cardiac pathologies or complaints e.g., acute coronary syndrome, cardiac chest pain)	Minimum of one (1) cardiac-related chest pain simulated scenario must be successfully completed prior to capstone field internship.	12	6	18





CoAEMSP Recommended Motor Skills Assessed and Success	Column 1 Successful Formative Individual <i>Simulated</i> Motor Skills Assessed in the Lab	Column 2 Minimum Successful Motor Skills Assessed on a Patient in Clinical or Field Experience or Capstone Field Internship *Simulation permitted for skills with asterisk	Totals	Column 4 Cumulative Motor Skill Competency Assessed on <i>Patients</i> During Clinical or Field Experience or Capstone Field Internship
Establish IV access	2	25	27	Report Success Rate
Administer IV infusion medication	2	2*	4	
Administer IV bolus medication	2	10	12	Report Success Rate
Administer IM injection	2	2	4	
Establish IO access	4	2*	6	
Perform PPV with BVM	4	10*	14	
Perform oral endotracheal intubation	2	10*	12	Report Success Rate
Perform endotracheal suctioning	2	2*	4	
Perform FBAO removal using Magill Forceps	2	2*	4	
Perform cricothyrotomy	2	2*	4	
Insert supraglottic airway	2	10*	12	
Perform needle decompression of the chest	2	2*	4	
Perform synchronized cardioversion	2	2*	4	
Perform defibrillation	2	2*	4	
Perform transcutaneous pacing	2	2*	4	
Perform chest compressions	2	2*	4	
Totals	: 36	87	123	



## Student Minimum Competency Table 4 Field Experience / Capstone Field Internship

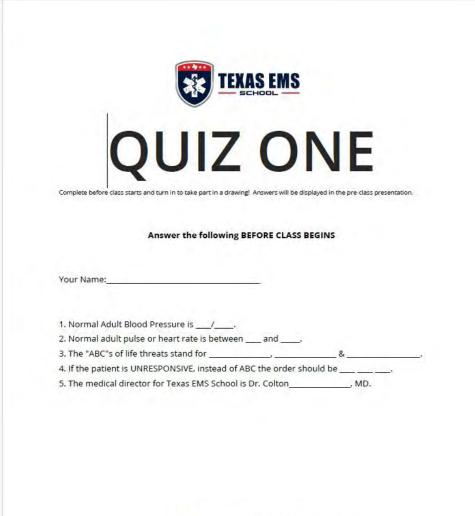
Field Experience	Capstone Field Internship
Conducts competent assessment and management of prehospital patients with assistance while TEAM LEADER or TEAM MEMBER	Successfully manages the scene, performs patient assessment(s) directs medical care and transport as <b>TEAM LEADER</b> with minimal to no assistance
30	20





EMT or Prerequisite Skill Competency (must document reasonable evidence of motor skill competency)	Evidence
Insert NPA	Completion of 2
Insert OPA	Completion of 2
Perform oral suctioning	Completion of 2
Perform FBAO - adult	Completion of 2
Perform FBAO - Infant	Completion of 2
Administer oxygen by nasal cannula	Completion of 1
Administer oxygen by face mask	Completion of 1
Ventilate an adult patient with a BVM	Completion of 2
Ventilate a pediatric patient with a BVM	Completion of 2
Ventilate a neonate patient with a BVM	Completion of 2
Apply a tourniquet	Completion of 1
Apply a cervical collar	Completion of 2
Perform spine motion restriction	Completion of 1
Lift and transfer a patient to the stretcher	Completion of 1
Splint a suspected long bone injury	Completion of 1
Splint a suspected joint injury	Completion of 1
Stabilize an impaled object	Completion of 1
Dress and bandage a soft tissue injury	Completion of 1
Apply an occlusive dressing to an open wound to the thorax	Completion of 1
Perform uncomplicated delivery	Completion of 2
Assess vital signs	Completion of 1
Perform a Comprehensive Physical Assessment	Completion of 1
Perform CPR - adult	Completion of 2
Perform CPR - pediatric	Completion of 2
Perform CPR - neonate	Completion of 2









	AGEMENT	
Candidate: Examiner: _		
Date: Signature:		
Actual Time Started:	Possib	
Takes or verbalizes appropriate PPE precautions	1	
Applies direct pressure to the wound	1	a) a
NOTE: The examiner must now inform candidate that the wound continues to	bleed.	1
Applies toumiquet	1	
NOTE: The examiner must now inform candidate that the patient is exhibiting	signs and symptoms of hypoperfusio	on.
Properly positions the patient	1	
Administers high concentration oxygen	1	
Initiates steps to prevent heat loss from the patient	1	
Indicates the need for immediate transportation	1	1
Actual Time Ended:	TOTAL 7	-
Exhibits unacceptable affect with patient or other personnel     Uses or orders a dangerous or inappropriate intervention You must factually document your rationale for checking any of the above crit	ical items on the reverse side of this:	form.
Uses or orders a dangerous or inappropriate intervention	ical items on the reverse side of this	form.
	ical items on the reverse side of this	form.
Uses or orders a dangerous or inappropriate intervention	ical items on the reverse side of this i	form.
Uses or orders a dangerous or inappropriate intervention	ical items on the reverse side of this i	form.
Uses or orders a dangerous or inappropriate intervention	ical items on the reverse side of this i	form.
Uses or orders a dangerous or inappropriate intervention	ical items on the reverse side of this	form.





Candidate:

National Registry of Emergency Medical Technicians® Emergency Medical Technician Psychomotor Examination

#### **OXYGEN ADMINISTRATION BY NON-REBREATHER MASK**

Examiner:

Date:	_ Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Gathers appropriate equipment		1	
Cracks valve on the oxygen tank		1	
Assembles the regulator to the oxygen tank		1	
Opens the oxygen tank valve		1	
Checks oxygen tank pressure		1	
Checks for leaks		1	
Attaches non-rebreather mask to correct port of regulator		1	
Turns on oxygen flow to prefill reservoir bag		1	
Adjusts regulator to assure oxygen flow rate of at least 10 L/minute		1	-
Attaches mask to patient's face and adjusts to fit snugly		1	
Actual Time Ended:	TOTAL	11	

CRITICAL CRITERIA

Failure to take or verbalize appropriate PPE precautions

Failure to assemble the oxygen tank and regulator without leaks

Failure to prefill the reservoir bag

Failure to adjust the oxygen flow rate to the non-rebreather mask of at lease 10 L/minute

Failure to ensure a tight mask seal to patient's face

Failure to manage the patient as a competent EMT

Exhibits unacceptable affect with patient or other personnel

Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

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BVM VENTILATION OF AN APN	LIC ADULI FAILLIIT	
Candidate: Exa	miner:	
Date: Sign	ature:	
Actual Time Started:		oints arded
Takes or verbalizes appropriate PPE precautions	1	
Checks responsiveness	1	
Requests additional EMS assistance	1	_
Checks breathing and pulse simultaneously NOTE: After checking responsiveness, then checking breathing and pu candidate, "The patient is unresponsive, apneic and has a weak pulse Opens airway properly	of the first second	
NOTE: The examiner must now inform the candidate, "The mouth is fu	l of secretions and vomitus."	
Prepares rigid suction catheter	1	
Turns on power to suction device or retrieves manual suction device	1	
Inserts rigid suction catheter without applying suction	1	
Suctions the mouth and oropharynx	1	
NOTE: The examiner must now inform the candidate, "The mouth and (	propharynx are clear."	
Opens the airway manually	1	
nserts oropharyngeal airway	1	
NOTE: The examiner must now inform the candidate, "No gag reflex is "Ventilates the patient immediately using a BVM device unattached to oxyg "'Award this point if candidate elects to ventilate initially with BVM attached	en	
first ventilation is delivered within 30 seconds.] NOTE: The examiner must now inform the candidate that ventilation is		_
Re-checks pulse for no more than 10 seconds	1	
Attaches the BVM assembly [mask, bag, reservoir] to oxygen [15 L/minute]	1	
Ventilates the patient adequately		
Proper volume to cause visible chest rise (1 point)	2	
-Proper rate [10 – 12/minute (1 ventilation every 5 – 6 seconds)] (1 point)		
Note: The examiner must now ask the candidate, "How would you know each ventilation?"	v if you are delivering appropriate volumes with	
Actual Time Ended:	TOTAL 16	
CRITICAL CRITERIA After suctioning the patient, failure to initiate ventilations within 30 second Failure to take or verbalize appropriate PPE precautions Failure to suction airway before ventilating the patient Suctions the patient for an excessive and prolonged time Failure to check responsiveness, then check breathing and pulse simulta Failure to voice and ultimately provide high oxygen concentration [at leas Failure to ventilate the patient at a rate of 10 – 12/minute (1 ventilation ev Failure to provide adequate volumes per breath [maximum 2 errors/minu Insertion or use of any adjunct in a manner dangerous to the patient Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention You must factually document your rationale for checking any of the ab	neously for no more than 10 seconds 85%] ery 5 – 6 seconds) e permissible]	ny tim
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National Registry of Emergency Medical Technicians<sup>®</sup> Emergency Medical Technician Psychomotor Examination

#### CARDIAC ARREST MANAGEMENT / AED

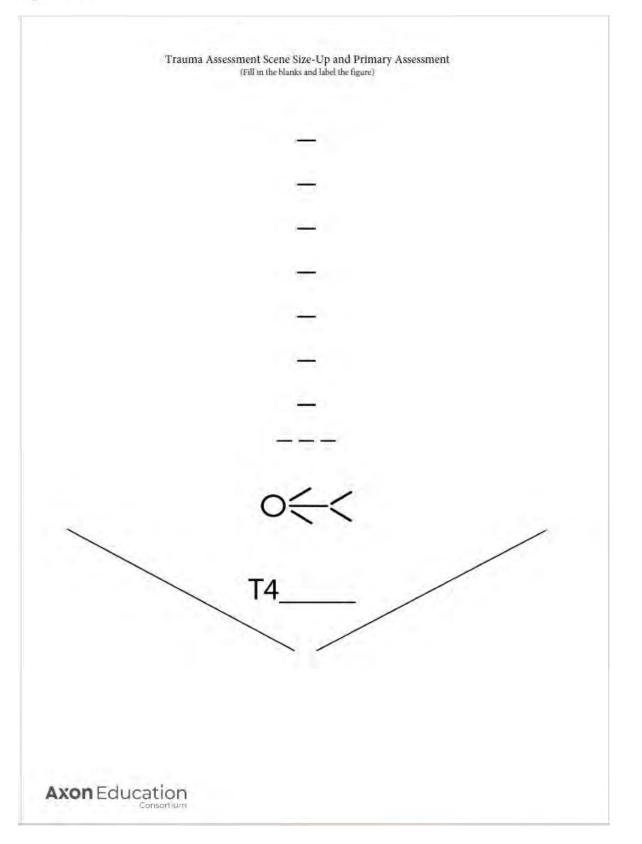
Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Fakes or verbalizes appropriate PPE precautions		1	1
Determines the scene/situation is safe		1	1
Checks patient responsiveness		1	
Direct assistant to retrieve AED		1	
Requests additional EMS assistance		1	1.000
Checks breathing and pulse simultaneously		1	
NOTE: After checking responsiveness, then checking examiner informs candidate, "The patient is unrespo		ids,	
mmediately begins chest compressions [adequate depth a	and rate; allows the chest to recoil completely]	1	
Performs 2 minutes of high-quality, 1-rescuer adult CPR -Adequate depth and rate (1 point) -Correct compression-to-ventilation ratio (1 point) -Allows the chest to recoil completely (1 point) -Adequate volumes for each breath (1 point) -Minimal interruptions of no more than 10 seconds through	ughout (1 point)	5	
NOTE: After 2 minutes (5 cycles), candidate assesses candidate operates AED.	s patient and second rescuer resumes compres	sions while	
Furns on power to AED		1	
Follows prompts and correctly attaches AED to patient		1	
Stops CPR and ensures all individuals are clear of the patie	ent during rhythm analysis	1	·
Ensures that all individuals are clear of the patient and deliv	vers shock from AED	1	<u></u>
mmediately directs rescuer to resume chest compressions	3	1	1
Actual Time Ended:	TOTAL	17	
Critical Criteria Failure to take or verbalize appropriate PPE precautio Failure to check responsiveness, then check breathing Failure to immediately begin chest compressions as s Failure to demonstrate acceptable high-quality, 1-reso Interrupts CPR for more than 10 seconds at any point Failure to demonstrate acceptable high-quality, 1-reso Interrupts CPR for more than 10 seconds at any point Failure to correctly attach the AED to the patient Failure to operate the AED properly Failure to deliver shock in a timely manner Failure to ensure that all individuals are clear of patien [verbalizes "All clear" and observes] Failure to immediately resume compressions after sho Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other pers Uses or orders a dangerous or inappropriate intervent You must factually document your rationale for checkin	g and pulse simultaneously for no more than 10 seco soon as pulselessness is confirmed cuer adult CPR t nt during rhythm analysis and before delivering shock ock delivered sonnel tion		orm.
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National Registry of Emergency Medical Technicians® Emergency Medical Technician Psychomotor Examination		
PATIENT ASSESSMENT/MANAGEMENT – TRAUMA		
Candidate: Examiner:		
Date: Signature:	-	
Scenario # Actual Time Started: Note: Areas denoted by "**" may be integrated within sequence of Primary Survey/Resuscitation	Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions	1 1	Awarded
SCENE SIZE-UP	1	
Determines the scene/situation is safe	1	
Determines the mechanism of injury/nature of illness Determines the number of patients	1	
Requests additional EMS assistance if necessary	1	
Considers stabilization of the spine	1	
PRIMARY SURVEY/RESUSCITATION	0	
Verbalizes general impression of the patient	1	
Determines responsiveness/level of consciousness Determines chief complaint/apparent life-threats	1	
Determines chier complaint/apparent lire-threats Airway	2	
-Opens and assesses airway (1 point) -Inserts adjunct as indicated (1 point)	2	1
Breathing -Assess breathing (1 point) -Initiates appropriate oxygen therapy (1 point) -Initiates appropriate oxygen therapy (1 point) -Manages any injury which may compromise breathing/ventilation (1 point)	4	1
Circulation -Checks pulse (1point) -Assess skin [either skin color, temperature or condition] (1 point) -Assesses for and controls major bleeding if present (1 point) -Initiates shock management [positions patient properly, conserves body heat] (1 point)	4	
Identifies patient priority and makes treatment/transport decision (based upon calculated GCS)	1	
HISTORY TAKING	-	e 1
Obtains baseline vital signs [must include BP, P and R] (1 point)	1	
Attempts to obtain SAMPLE history SECONDARY ASSESSMENT	1 1	-
Head -Inspects and palpates scalp and ears (1 point) ** -Assesses eyes (1 point) -Inspects mouth**, nose** and assesses facial area (1 point)	3	
Neck** -Checks position of trachea (1 point) -Checks jugular veins (1 point) -Palpates cervical spine (1 point)	3	
-Inspects chest (1 point) -Palpates chest (1 point) -Auscultates chest (1 point)	3	1
Abdomen/pelvis** -Inspects and palpates abdomen (1 point) -Verbalizes assessment of genitalia/perineum as needed (1 point)	3	
Lower extremities"	2	
<ul> <li>-Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/leg)</li> <li>Upper extremities</li> </ul>	-	
-Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/arm)	2	1
-Inspects and palpates posterior thorax (1 point) -Inspects and palpates lumbar and buttocks areas (1 point)	2	
Manages secondary injuries and wounds appropriately	1	
REASSESSMENT	-	
Demonstrates how and when to reassess the patient	1	
Actual Time Ended: TOTAI CRITICAL CRITERIA	42	
Failure to initiate or call for transport of the patient within 10 minute time limit Failure to take or verbalize appropriate PPE precautions Failure to determine scene safety Failure to determine scene safety Failure to assess for and provide spinal protection when indicated Failure to voice and ultimately provide high concentration oxygen Failure to assess/provide adequate ventilation Failure to assess/provide adequate ventilation Failure to differentiate patient's need for immediate transportation versus continued assessment/treatment at the scene Performs other assessment before assessing/treating threats to airway, breathing and circulation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention You must factually document your rationale for checking any of the above critical items on the reverse side of this form.		
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Candidate:

National Registry of Emergency Medical Technicians® Emergency Medical Technician Psychomotor Examination

#### PATIENT ASSESSMENT/MANAGEMENT - MEDICAL

E.com	
Exar	

Date:		Signature:		
Scenario #				
Actual Time Started:			Possible Points	Points Awarded
Takes or verbalizes appropr	iate PPE precautions		1	
SCENE SIZE-UP				
Determines the scene/situat	ion is safe		1	
Determines the mechanism	of injury/nature of illness		1	
Determines the number of p	atients		1	
Requests additional EMS as	sistance if necessary		1	
Considers stabilization of the	e spine		1	
PRIMARY SURVEY/RESU	SCITATION		Q	C
Verbalizes the general impre	ession of the patient		1	C
Determines responsiveness	level of consciousness (AVPU)		1	
Determines chief complaint/	apparent life-threats		1	
Assesses airway and breath	ing	Contractor and the second	1-2-3	
-Assessment (1 point)	-Assures adequate ventilation (1 p	point) -Initiates appropriate oxygen therapy (1 point)	3	
Assesses circulation			Plant Special St	
-Assesses/controls major bl	eeding (1 point)	-Checks pulse (1 point)	3	
	olor, temperature or condition] (1 poi		1.000	-
	makes treatment/transport decision		1	2
HISTORY TAKING				
History of the present illness	and the second se			
-Onset (1 point)	-Quality (1 point)	-Severity (1 point)	100	
-Provocation (1 point)	-Radiation (1 point)	-Time (1 point)	8	
	ciated signs and symptoms related b	o OPQRST (2 points)		
Past medical history			1.	
-Allergies (1 point)	-Past pertinent history (1 po	pint) -Events leading to present illness (1 point)	5	
-Medications (1 point)	-Last oral intake (1 point)			
SECONDARY ASSESSME			-	_
Assesses affected body par		States and s	10.0	
-Cardiovascular		egumentary -Reproductive	5	
-Pulmonary	-Musculoskeletal -GI/	GU -Psychological/Social		
VITAL SIGNS				
-Blood pressure (1 point)	-Pulse (1 point)	-Respiratory rate and quality (1 point each)	4	
States field impression of pa	tient		1	
Interventions [verbalizes pro	per interventions/treatment]		1	
REASSESSMENT			-	_
	n to reassess the patient to determin	e changes in condition	1	-
Provides accurate verbal rep	port to arriving EMS unit		1	_
Actual Time Ended:		TOTAL	42	Correct Correction
CRITICALCRITERIA				
	for transport of the patient within 15 mi	inute time limit		
	ize appropriate PPE precautions			
	ne safety before approaching patient			
	mately provide appropriate oxygen ther	rapy		
Failure to assess/provid				
		vith airway, breathing, hemorrhage or shock		
		tion versus continued assessment or treatment at the some		
		g threats to airway, breathing and circulation		
0.1		A CARLON CONTRACTOR OF CONTRACTO		

Orders a dangerous or inappropriate intervention Failure to provide accurate report to arriving EMS unit.

Failure to manage the patient as a competent EMT

Exhibits unacceptable affect with patient or other personnel

Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

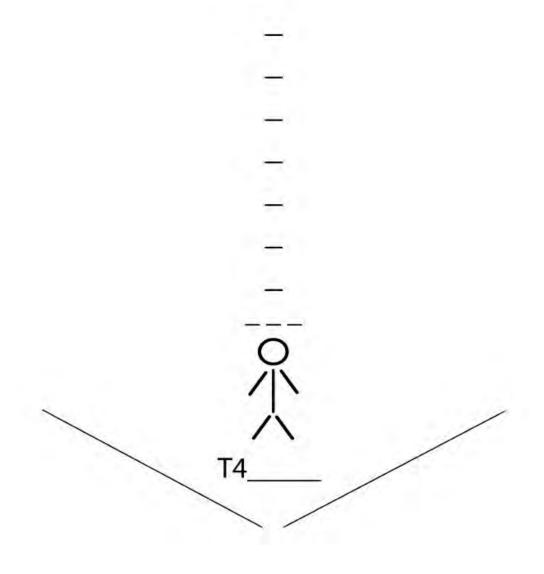
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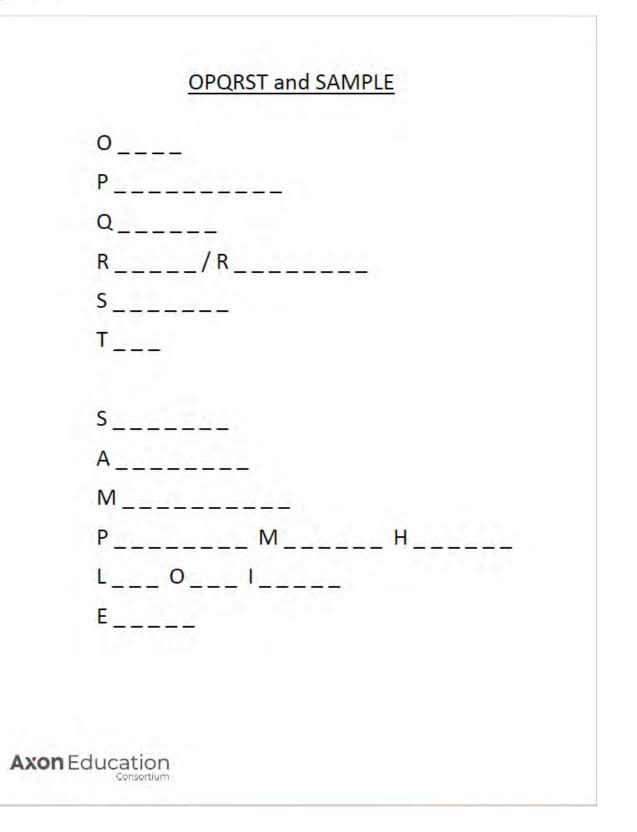
Medical Assessment Scene Size-Up and Primary Assessment

(Fill in the Blanks and Label the Figure)



### Axon Education







PARAMEDIC SKILLS SESSION 1 LAB		
Name:	Date: City:	
Observer(s):	/	
Evaluator(s):		
BASIC S	KILLS PRACTICE	
Insert NPA.	Lift and transfer a patient to the	
Performed 1	stretcher.	
Insert OPA.	Performed 1	
Performed 1	Splint a suspected long bone injury.	
Perform oral suctioning	Derformed 1	

Perform oral suctioning. Performed 1 \_\_\_\_ Perform FBAO – adult. Witness: Performed 1 Perform FBAO – infant. Performed 1 Administer O2 by NC. Performed 1 \_ Administer O2 by face mask. Performed 1 Ventilate an adult with BVM. Performed 1 Ventilate a pediatric with BVM. Performed 1 \_ Ventilate a neonate with BVM. Performed 1 Apply a tourniquet. Performed 1 Apply a cervical collar. Performed 1 Perform spine motion restriction. Performed 1

Performed 1 \_ Splint a suspected joint injury. Performed 1 Stabilize an impaled object. Performed 1 Dress and bandage a soft tissue injury. Performed 1 \_\_\_\_ Apply an occlusive dressing to open wound to the thorax. Performed 1 Perform uncomplicated obstetric delivery. Performed 1 \_ Assess vital signs. Performed 1 Perform a Comprehensive Physical Assessment Performed 1 Perform CPR - adult. Performed 1 \_ Perform CPR – pediatric. Performed 1 Perform CPR - neonate. Performed 1 \_\_\_\_\_



#### PARAMEDIC SKILLS SESSION 1 LAB

Name:	_ Date:	_ City:
Observer(s):	/	
Evaluator(s):	/	

### PARAMEDIC SKILLS PRACTICE

Establish IV access.				
	Performed 2			
Administer IV infu	sion medication.			
Performed 1	Performed 2			
Administer IV bolu	is medication.			
Performed 1	Performed 2			
Administer IM inje	ction.			
Performed 1	Performed 2			
Establish IO acces	8 <b>8</b> .			
Performed 1	Performed 2			
Performed 3	Performed 4			
Perform PPV with BVM.				
Performed 1	Performed 2			
Performed 3	Performed 4			
Perform oral endo	tracheal intubation.			
Performed 1	Performed 2			
Perform endotracl	heal suctioning.			
Performed 1	Performed 2			
Perform FBAO using Magill forceps.				
Performed 1	Performed 2			

Perform cricothyrotomy. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_ Insert supraglottic airway. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_ Perform needle decompression to the chest. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_ Perform synchronized cardioversion. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_ Perform defibrillation. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_ Perform transcutaneous pacing. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_ Perform chest compressions. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_ Pediatric intubation. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_ Nasotracheal Intubation. Performed 1 \_\_\_\_\_ Performed 2 \_\_\_\_\_





	PARAMEDIC SKILLS	SESSI	ON 2 LAB
Na	me:		Date:
Instru	ictor:		Location:
_	FORMATIVE SIMULATED PARAMED		
	Obstetric delivery with normal new		care
_	Scenario # Scenario #		
Ц	Complicated delivery – Prolapsed	cord.	
_	Scenario #		
	Complicated delivery – Breech Pre	esenta	ition.
_	Scenario #		
	Distressed neonate.		
_	Scenario # Scenario #		
	Cardiac arrest.		
	Scenario # Scenario #		
	Administer IV infusion		Insert supraglottic airway.
	medication.		Scenario #
	Scenario #		Scenario #
	Establish IO Access.		Scenario #
	Scenario # Perform PPV with BVM		Scenario # Scenario #
	Scenario #	п	Perform needle decompression
	Scenario #	-	of the chest.
	Scenario #		Scenario #
	Scenario #		Perform synchronized
_	Scenario #		cardioversion.
	Perform oral endotracheal intubation.		Scenario # Perform defibrillation.
	Scenario #	Ц	Scenario #
	Scenario #		Perform transcutaneous pacing.
	Scenario #		Scenario #
	Scenario #		Perform chest compressions.
_	Scenario #		Scenario #
	Perform endotracheal suctioning. Scenario #		
_	Perform FBAO removal using		
<u> </u>	Magill forceps.		
	Scenario #		
	Perform cricothyrotomy.		
	Scenario #		

Updated 7/10/2024



PARAM	IEDIC SKILLS SESSION 3 LAB
Name:	Date:
Instructor:	Location:
SUMMATIVE SIMULA	TED PARAMEDIC SCENARIOS WITH SKILLS
Pediatric trauma.	
Scenario #	
Adult trauma.	
Scenario #	
Psychiatric	
Scenario #	
Complicated delivery	<ul> <li>Prolapsed cord.</li> </ul>
Scenario #	
Complicated delivery	<ul> <li>Breech Presentation.</li> </ul>
Scenario #	
Distressed neonate.	
Scenario #	
	or complaints – Cardiac related chest pain.
Scenario #	
Cardiac arrest.	
Scenario #	
	pathologies or complaints – Geriatric stroke.
Scenario #	
	es or complaints – Geriatric respiratory
distress/failure.	
Scenario #	
	es or complaints – Pediatric respiratory
distress/failure.	
Scenario #	
Other medical condition	ons or complaints – Geriatric sepsis.
Scenario #	



	PARAMEDIC SKILL	S SESSI	ON 3 LAB
Na	ime:		_ Date:
Instructor:			Location:
	SUMMATIVE SIMULATED PARAM	EDIC SC	ENARIOS WITH SKILLS
	Administer IV infusion medication.		Perform cricothyrotomy.
	Scenario #	П	Scenario # Insert supraglottic airway.
	Establish IO Access.	_	Scenario #
	Scenario #		Scenario #
	Perform PPV with BVM		Scenario #
	Scenario #		Scenario #
	Scenario #		Scenario #
	Scenario #		Perform needle decompression
	Scenario #		of the chest.
	Scenario #		Scenario #
	Perform oral endotracheal		Perform synchronized
	intubation.		cardioversion.
	Scenario #	_	Scenario #
	Scenario #		Perform defibrillation.
	Scenario #	_	Scenario #
	Scenario #		Perform transcutaneous pacing.
_	Scenario #	_	Scenario #
	Perform endotracheal suctioning. Scenario #	Ĺ	Perform chest compressions. Scenario #
	Perform FBAO removal using		Scenario #

Magill forceps. Scenario #\_\_\_\_\_



#### National Registry of Emergency Medical Technicians Psychomotor Evaluation: Bleeding Control/Shock Management

BLEEDING CONTROL/SHOCK MANAGEMENT	r		
BLEEDING CONTROL/SHOCK MANAGEMENT			
Candidate: Examiner:			
Date: Signature:			
Actual Time Started:		ssible oints	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Applies direct pressure to the wound		1	
NOTE: The examiner must now inform candidate that the wound continues to bleed.			
Applies toumiquet		1	-
NOTE: The examiner must now inform candidate that the patient is exhibiting signs and s	vmptoms of hypopen	fusion.	-
Properly positions the patient		1	
Administers high concentration oxygen		1	
Initiates steps to prevent heat loss from the patient		1	
Indicates the need for immediate transportation		1	
Actual Time Ended:	TOTAL	7	1
Failure to control hemorrhage using correct procedures in a timely manner Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention You must factually document your rationale for checking any of the above critical items or	n the reverse side of 1	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	п.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	n.
Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	n the reverse side of i	this form	п.
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### National Registry of Emergency Medical Technicians Psychomotor Evaluation: Oxygen Administration by Non-Breather Mask

Emergency Medical	of Emergency Medical Technicians® Technician Psychomotor Examination RATION BY NON-REBREATHER MASK		
Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Gathers appropriate equipment		1	-
Cracks valve on the oxygen tank		1	
Assembles the regulator to the oxygen tank		1	
Opens the oxygen tank valve		1	
Checks oxygen tank pressure		1	
Checks for leaks		1	
Attaches non-rebreather mask to correct port of regulator		1	
Turns on oxygen flow to prefill reservoir bag		1	
Adjusts regulator to assure oxygen flow rate of at least 10 L	/minute	1	
Attaches mask to patient's face and adjusts to fit snugly		1	
Actual Time Ended:	TOTAL	11	

CRITICAL CRITERIA

Failure to take or verbalize appropriate PPE precautions

\_\_\_\_\_ Failure to assemble the oxygen tank and regulator without leaks

\_\_\_\_\_ Failure to prefill the reservoir bag

\_\_\_\_\_ Failure to adjust the oxygen flow rate to the non-rebreather mask of at lease 10 L/minute

\_\_\_\_\_ Failure to ensure a tight mask seal to patient's face

\_\_\_\_\_ Failure to manage the patient as a competent EMT

\_\_\_\_\_ Exhibits unacceptable affect with patient or other personnel

\_\_\_\_\_ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

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Updated 7/10/2024



## National Registry of Emergency Medical Technicians Psychomotor Evaluation: BVM Ventilation of an Apneic Adult Patient

BVM VENTILATION OF AN APP           Candidate:         Ex           Date:         Sig           Actual Time Started:         Sig           Takes or verbalizes appropriate PPE precautions         Checks responsiveness           Requests additional EMS assistance         Checks breathing and pulse simultaneously           NOTE: After checking responsiveness, then checking breathing and p         candidate, "The patient is unresponsive, apneic and has a weak pulse           Opens ainway properly         NOTE: The examiner must now inform the candidate, "The mouth is fre           Prepares rigid suction catheter         Tums on power to suction device or retrieves manual suction device           Inserts rigid suction catheter without applying suction         Suctions the mouth and oropharynx           NOTE: The examiner must now inform the candidate, "The mouth and Opens the airway manually         Inserts oropharyngeal airway           NOTE: The examiner must now inform the candidate, "No gag reflex is "Ventilates the patient immediately using a BVM device unattached to oxy."	aminer: gnature: Poulse for no more than 10 seconds, examine e of 60." ull of secretions and vomitus."	ssible oints // 1 1 1	Points Awarded
Date:	gnature: Po P pulse for no more than 10 seconds, examine e of 60." ull of secretions and vomitus."	ssible 1 1 1 1 1 1 1 1 1 1 1 1 1	Awarded
Actual Time Started:	Po P pulse for no more than 10 seconds, examine e of 60." ull of secretions and vomitus."	oints         I           1         1           1         1           1         1           1         1           1         1           1         1           1         1           1         1           1         1           1         1           1         1           1         1	Awarded
Takes or verbalizes appropriate PPE precautions Checks responsiveness Requests additional EMS assistance Checks breathing and pulse simultaneously NOTE: After checking responsiveness, then checking breathing and p candidate, "The patient is unresponsive, apneic and has a weak pulse Opens aiway properly NOTE: The examiner must now inform the candidate, "The mouth is fu Prepares rigid suction catheter Turns on power to suction device or retrieves manual suction device Inserts rigid suction catheter without applying suction Suctions the mouth and oropharynx NOTE: The examiner must now inform the candidate, "The mouth and Opens the airway manually Inserts oropharyngeal airway NOTE: The examiner must now inform the candidate, "No gag reflex is "Ventilates the patient immediately using a BVM device unattached to oxy.	P oulse for no more than 10 seconds, examin e of 60." ull of secretions and vomitus."	oints         I           1         1           1         1           1         1           1         1           1         1           1         1           1         1           1         1           1         1           1         1           1         1           1         1	Awarded
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Turns on power to suction device or retrieves manual suction device Inserts rigid suction catheter without applying suction Suctions the mouth and oropharynx NOTE: The examiner must now inform the candidate, "The mouth and Opens the airway manually Inserts oropharyngeal airway NOTE: The examiner must now inform the candidate, "No gag reflex is "Ventilates the patient immediately using a BVM device unattached to oxy;	l oropharynx are clear."	1	
Inserts rigid suction catheter without applying suction Suctions the mouth and oropharynx NOTE: The examiner must now inform the candidate, "The mouth and Opens the airway manually Inserts oropharyngeal airway NOTE: The examiner must now inform the candidate, "No gag reflex is "Ventilates the patient immediately using a BVM device unattached to oxy;	l oropharynx are clear."	1	
Suctions the mouth and oropharynx NOTE: The examiner must now inform the candidate, "The mouth and Opens the airway manually Inserts oropharyngeal airway NOTE: The examiner must now inform the candidate, "No gag reflex is "Ventilates the patient immediately using a BVM device unattached to oxy;	l oropharynx are clear."		
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Opens the airway manually Inserts oropharyngeal airway NOTE: The examiner must now inform the candidate, "No gag reflex is "Ventilates the patient immediately using a BVM device unattached to oxy;	r oropnarynx are ciear."		
Inserts oropharyngeal airway NOTE: The examiner must now inform the candidate, "No gag reflex is "Ventilates the patient immediately using a BVM device unattached to oxy;		1	
NOTE: The examiner must now inform the candidate, "No gag reflex is "Ventilates the patient immediately using a BVM device unattached to oxy,		1	_
**Ventilates the patient immediately using a BVM device unattached to oxy	s present and the nationt accents the airw.		. 0
		ay aujunce	
[**Award this point if candidate elects to ventilate initially with BVM attached		1	
first ventilation is delivered within 30 seconds.1			
NOTE: The examiner must now inform the candidate that ventilation is	s being properly performed without difficu	ltv.	
Re-checks pulse for no more than 10 seconds		1	
Attaches the BVM assembly [mask, bag, reservoir] to oxygen [15 L/minute]	1	1	
Ventilates the patient adequately			
-Proper volume to cause visible chest rise (1 point)		2	
-Proper rate [10 - 12/minute (1 ventilation every 5 - 6 seconds)] (1 point)		- 1 - 1	
Note: The examiner must now ask the candidate, "How would you kno	ow if you are delivering appropriate volum	es with	
each ventilation?"			
Actual Time Ended:	TOTAL	16	
CRITICAL CRITERIA			
After suctioning the patient, failure to initiate ventilations within 30 secon	nds or interrupts ventilations for greater than 30	seconds a	t any time
Failure to take or verbalize appropriate PPE precautions			
Failure to suction airway before ventilating the patient			
Suctions the patient for an excessive and prolonged time			
Failure to check responsiveness, then check breathing and pulse simult	taneously for no more than 10 seconds		
Failure to voice and ultimately provide high oxygen concentration [at lea			
Failure to ventilate the patient at a rate of 10 - 12/minute (1 ventilation e	every 5 – 6 seconds)		
Failure to provide adequate volumes per breath [maximum 2 errors/min	ute permissible]		
Insertion or use of any adjunct in a manner dangerous to the patient			
Failure to manage the patient as a competent EMT			
Exhibits unacceptable affect with patient or other personnel			
Uses or orders a dangerous or inappropriate intervention			
You must factually document your rationale for checking any of the al	bove critical items on the reverse side of t	his form.	





# National Registry of Emergency Medical Technicians Psychomotor Evaluation: Cardiac Arrest Management [AED]

Candidate: Examiner:		_
Date: Signature:		
Actual Time Started:	Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions	1	
Determines the scene/situation is safe	1	
Checks patient responsiveness	1	
Direct assistant to retrieve AED	1	1.1
Requests additional EMS assistance	1	
Checks breathing and pulse simultaneously	1	-
NOTE: After checking responsiveness, then checking breathing and pulse for no more than 10 seco examiner informs candidate, "The patient is unresponsive, apneic and pulseless."		
Immediately begins chest compressions [adequate depth and rate; allows the chest to recoil completely]	1	-
Performs 2 minutes of high-quality, 1-rescuer adult CPR -Adequate depth and rate (1 point) -Correct compression-to-ventilation ratio (1 point) -Allows the chest to recoil completely (1 point) -Adequate volumes for each breath (1 point) -Minimal interruptions of no more than 10 seconds throughout (1 point)	5	
NOTE: After 2 minutes (5 cycles), candidate assesses patient and second rescuer resumes compres candidate operates AED.		
Turns on power to AED	1	
Follows prompts and correctly attaches AED to patient	1	-
Stops CPR and ensures all individuals are clear of the patient during rhythm analysis	1	
Ensures that all individuals are clear of the patient and delivers shock from AED	1	
Immediately directs rescuer to resume chest compressions	1	-
Actual Time Ended: TOTAL	17	
Critical Criteria Failure to take or verbalize appropriate PPE precautions Failure to take or verbalize appropriate PPE precautions Failure to check responsiveness, then check breathing and pulse simultaneously for no more than 10 sec Failure to immediately begin chest compressions as soon as pulselessness is confirmed Failure to demonstrate acceptable high-quality, 1-rescuer adult CPR Interrupts CPR for more than 10 seconds at any point Failure to operate the AED to the patient Failure to operate the AED properly Failure to ensure that all individuals are clear of patient during rhythm analysis and before delivering shoc (verbalizes "All cear" and observes] Failure to immediately resume compressions after shock delivered Failure to immediately assessed to the personnel Uses or orders a dangerous or inappropriate intervention		
You must factually document your rationale for checking any of the above critical items on the reverse	side of this fo	orm.



PATIEN	T ASSESSMENT MANAGEMENT TO MANA		
	NT ASSESSMENT/MANAGEMENT – TRAUMA		
Candidate:	Examiner:		_
Date:	Signature:		
Scenario #		11.11	
AND THE PERSON AND A REAL PROPERTY AND A REAL	by "**" may be integrated within sequence of Primary Survey/Resuscitation	Possible Points	Points Awarde
akes or verbalizes appropriate PPE precautions		1	Awarde
CENE SIZE-UP			
Determines the scene/situation is safe		1	
Determines the mechanism of injury/nature of illness		1	
Determines the number of patients Requests additional EMS assistance if necessary		1	
Considers stabilization of the spine		1	
RIMARY SURVEY/RESUSCITATION		<u> </u>	
/erbalizes general impression of the patient		1	1
Determines responsiveness/level of consciousness		1	-
Determines chief complaint/apparent life-threats		1	1
Sirway	1. 2. C. M. W. M.	2	1
-Opens and assesses airway (1 point)	-Inserts adjunct as indicated (1 point)	-	
-Assess breathing (1 point)	-Assures adequate ventilation (1 point)	4	
-Initiates appropriate oxygen therapy (1 point)	-Manages any injury which may compromise breathing/ventilation (1 point)	-	
Circulation -Checks pulse (1point) -Assess skin [either skin color, temperature or condit -Assesses for and controls major bleeding if present -Initiates shock management [positions patient prope	(1 point)	4	
dentifies patient priority and makes treatment/transport		1	1
IISTORY TAKING		1	
Obtains baseline vital signs [must include BP, P and R]	(1 point)	1	
Attempts to obtain SAMPLE history		1	
ECONDARY ASSESSMENT		r	-
<ul> <li>-Inspects and palpates scalp and ears (1 point) **</li> <li>-Inspects mouth**, nose** and assesses facial area</li> </ul>	-Assesses eyes (1 point) (1 point)	3	
<ul> <li>Veck**</li> <li>-Checks position of trachea (1 point)</li> </ul>	-Checks jugular veins (1 point) -Palpates cervical spine (1 point)	3	
-Inspects chest (1 point)	-Palpates chest (1 point) -Auscultates chest (1 point)	3	1
bdomen/pelvis**		1.000	
<ul> <li>-Inspects and palpates abdomen (1 point)</li> <li>-Verbalizes assessment of genitalia/perineum as needed.</li> </ul>	-Assesses pelvis (1 point) eded (1 point)	3	
ower extremities**		2	
-Inspects, palpates and assesses motor, sensory an	d distal circulatory functions (1 point/leg)	- 2	-
<ul> <li>Ipper extremities</li> <li>Inspects, palpates and assesses motor, sensory and</li> </ul>	d distal circulatory functions (1 point/arm)	2	
osterior thorax, lumbar and buttocks**		2	1
search and a search, rentiger enter outcource	-Inspects and palpates lumbar and buttocks areas (1 point)	1	
-Inspects and palpates posterior thorax (1 point)		1	
-Inspects and palpates posterior thorax (1 point) Aanages secondary injuries and wounds appropriately		1	1
-Inspects and palpates posterior thorax (1 point) Manages secondary injuries and wounds appropriately REASSESSMENT		1	-
-Inspects and palpates posterior thorax (1 point) Aanages secondary injuries and wounds appropriately EASSESSMENT Demonstrates how and when to reassess the patient	3.6.8.2		
-Inspects and palpates posterior thorax (1 point) Manages secondary injuries and wounds appropriately REASSESSMENT	TOTAL	42	

### Assessment/Management - Trauma

### Assessment/Management - Medical



Carrow Contraction	PATIENT A	SSESSMENT/MANAG	GEMENT - MEDICAL		
Candidate:		Eva	miner:		
a constant and a second se					
Date:		Sigr	nature:		
Scenario #					
Actual Time Started:				Possible Points	Points Awarded
Takes or verbalizes appropr	iate PPE precautions			1	
SCENE SIZE-UP	1				1
Determines the scene/situat Determines the mechanism				1	
Determines the number of p	and the second			1	-
Requests additional EMS as				1	1
Considers stabilization of the	e spine			1	
PRIMARY SURVEY/RESU	SCITATION				
Verbalizes the general impre				1	
Determines responsiveness		PU)		1	
Determines chief complaint/	C. 6. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1	
Assesses airway and breath Assessment (1 point)	-Assures adequate venti	lation (1 point) -Initiate	es appropriate oxygen therapy (1 point)	3	
Assesses circulation -Assesses/controls major ble -Assesses skin (either skin o	and the second se		s pulse (1 point)	3	
Identifies patient priority and				1	-
HISTORY TAKING				-	
History of the present illness -Onset (1 point)	-Quality (1 point)	-Severit	y (1 point)	1	
-Provocation (1 point) -Clarifying questions of asso	-Radiation (1 point ociated signs and symptoms			8	1
Past medical history -Allergies (1 point) -Medications (1 point)	-Past pertinent his -Last oral intake (1		leading to present illness (1 point)	5	
SECONDARY ASSESSME		. F			
Assesses affected body part	22.2				
-Cardiovascular	-Neurological	-Integumentary	-Reproductive	5	
-Pulmonary	-Musculoskeletal	-GI/GU	-Psychological/Social		
VITAL SIGNS				-	
-Blood pressure (1 point)	-Pulse (1 point)	-Respin	atory rate and quality (1 point each)	4	
States field impression of pa Interventions [verbalizes pro				1	
REASSESSMENT	per intervenuorisriteauneni			1	-
Demonstrates how and whe	n to reassess the patient to	determine changes in con	dition	1	
Provides accurate verbal rep				1	
Actual Time Ended:		the second s	TOTAL	42	1.2.1
CRITICALCRITERIA	and the second se				
Failure to initiate or call	for transport of the patient wi	thin 15 minute time limit			
	ize appropriate PPE precauti				
	ene safety before approaching				
	mately provide appropriate or	kygen therapy			
Failure to assess/provid	e adequate ventilation riately manage problems ass	coninted with sinuau herethi	na hamorhaga or shook		
	and the second	A COMPANY OF A COM	ied assessment or treatment at the some		
a comparison of the later of the state of th	amination before assessing a				
	nappropriate intervention	Concernance and			
	ate report to arriving EMS un	it			
	atient as a competent EMT				
	ffect with patient or other per				
	rous or inappropriate interver	ntion			
			s on the reverse side of this form.		



#### Clinical and Field Portfolio for Advanced EMT and Paramedic Students

CoAEMSP Student Minimum Competency (SMC)	Column 1 Formative Exposure in Clinical or Field Experience Conducts patient assessment, performs mater skills if appropriate and available, and assists with development of a management plan in patient exposures with some assistance for evaluation	Column 2 Exposure in Clinical or Field Experience and Capstone Field Internship	Total	Minimum Recommendations by Age* (*included in the total)
	15	15	30	Minimum Age Exposure
				2 Neonate (birth to 30 days)
				2 Infant 2 (1 mo - 12 mos)
Pediatric patients with pathologies or				2 Toddler 2 (1 to 2 years)
complaints				2 (3 to 5 years)
				School-Aged/ 2 Preadolescent (6 to 12 years)
				2 Adolescent (13 to 18 years)
Adult	30	30	60	(19 to 65 years of age)
Geriatric	9	9	18	(older than 65 years of age)
Totals:	54	54	108	





CoAEMSP Student Minimum Competency by Pathology or Complaint	Simulation	Column 1 Formative Exposure in Clinical or Field Experience Conducts patient assessment (primary and secondary assessment) and performs motor skills if appropriate and available, and assists with development of a management plan on a <u>patient</u> with some assistance for evaluation.	Column 2 Exposure in Clinical or Field Experience/Capstone Field Internship Conducts a patient assessment and develops a management plan for evaluation on each patient with minimal to no assistance	Total Formative & Competency Evaluations by Condition or Complaint
Trauma	Minimum of one (1) pediatric and one (1) adult trauma simulated scenario must be successfully completed prior to capstone field internship.	18	9	27
Psychiatric/ Behavioral	Minimum of one (1) psychiatric simulated scenario must be successfully completed prior to capstone field internship.	12	6	18
Obstetric delivery with normal newborn care	N/A	2 (simulation permitted)		6
Complicated obstetric delivery (e.g., breech, prolapsed cord, shoulder dystocia, precipitous delivery, multiple births, meconium staining, premature birth, abnormal presentation, postpartum hemorrhage)	Minimum of two (2) complicated obstetric delivery simulated scenarios must be successfully completed prior to capstone field internship including a prolapsed cord and a breech delivery.	2 (simulation permitted)	2 (simulation permitted)	
Distressed neonate (birth to 30 days)	Minimum of one (1) distressed neonate following delivery simulated scenario must be successfully completed prior to capstone field internship.	2 (simulation permitted)	2 (simulation permitted)	4





	Totals:	88	46	134
Other medical conditions or complaints (e.g., gastrointestinal, genitourinary, gynecologic, reproductive pathologies, or abdominal pain complaints, infectious disease, endocrine disorders or complaints (hypogiycemic), DKA, HHNS, thyrotoxic crisis, myxedema, Addison's, Cushing's), overdose or substance abuse, toxicology, hematologic disorders, non-traumatic musculoskeletal disorders, diseases of the eyes, ears, nose, and throat)	Minimum of one (1) geriatric sepsis simulated scenario must be successfully completed prior to capstone field internship.	12	6	18
Respiratory pathologies or complaints (e.g., respiratory distress, respiratory failure, respiratory arrest, acute asthma episode, lower respiratory infection)	Minimum of one (1) pediatric and one (1) geriatric respiratory distress/failure simulated scenario must be successfully completed prior to capstone field internship.	8	4	12
Medical neurologic pathologies or complaints (e.g., transient ischemic attack, stroke, syncope or altered mental status presentation)	Minimum of one (1) geriatric stroke simulated sconario must be successfully completed prior to capstone field internship.	8	4	12
Cardiac dysrhythmias	N/A	10	6	16
Cardiac arrest	Minimum of one (1) cardiac arrest simulated scenario must be successfully completed prior to capstone field internship.	2 (simulation permitted)	1 (simulation permitted)	3
Cardiac pathologies or complaints (e.g., acute coronary syndrome, cardiac chest pain)	Minimum of one (1) cardiac-related chest pain simulated scenario must be successfully completed prior to capstone field internship.	12	6	18





CoAEMSP Recommended Motor Skills Assessed and Success	Column 1 Successful Formative Individual <i>Simulated</i> Motor Skills Assessed in the Lab	Column 2 Minimum Successful Motor Skills Assessed on a Patient in Clinical or Field Experience or Capstone Field Internship *Simulation permitted for skills with asterisk	Totals	Column 4 Cumulative Motor Skill Competency Assessed on <i>Patients</i> During Clinical or Field Experience or Capstone Field Internship
Establish IV access	2	25	27	Report Success Rate
Administer IV infusion medication	2	2*	4	
Administer IV bolus medication	2	10	12	Report Success Rate
Administer IM injection	2	2	4	
Establish IO access	4	2*	6	
Perform PPV with BVM	4	10*	14	
Perform oral endotracheal intubation	2	10*	12	Report Success Rate
Perform endotracheal suctioning	2	2*	4	
Perform FBAO removal using Magill Forceps	2	2*	4	
Perform cricothyrotomy	2	2*	4	
Insert supraglottic airway	2	10*	12	
Perform needle decompression of the chest	2	2*	4	
Perform synchronized cardioversion	2	2*	4	
Perform defibrillation	2	2*	4	
Perform transcutaneous pacing	2	2*	4	
Perform chest compressions	2	2*	4	
Totals	: 36	87	123	



### Student Minimum Competency Table 4 Field Experience / Capstone Field Internship

Field Experience	Capstone Field Internship
Conducts competent assessment and management of prehospital patients with assistance while TEAM LEADER or TEAM MEMBER	Successfully manages the scene, performs patient assessment(s) directs medical care and transport as TEAM LEADER with minimal to no assistance
30	20

Updated 7/10/2024





EMT or Prerequisite Skill Competency (must document reasonable evidence of motor skill competency)	Evidence
Insert NPA	Completion of 2
Insert OPA	Completion of 2
Perform oral suctioning	Completion of 2
Perform FBAO - adult	Completion of 2
Perform FBAO - Infant	Completion of 2
Administer oxygen by nasal cannula	Completion of 1
Administer oxygen by face mask	Completion of 1
Ventilate an adult patient with a BVM	Completion of 2
Ventilate a pediatric patient with a BVM	Completion of 2
Ventilate a neonate patient with a BVM	Completion of 2
Apply a tourniquet	Completion of 1
Apply a cervical collar	Completion of 2
Perform spine motion restriction	Completion of 1
Lift and transfer a patient to the stretcher	Completion of 1
Splint a suspected long bone injury	Completion of 1
Splint a suspected joint injury	Completion of 1
Stabilize an impaled object	Completion of 1
Dress and bandage a soft tissue injury	Completion of 1
Apply an occlusive dressing to an open wound to the thorax	Completion of 1
Perform uncomplicated delivery	Completion of 2
Assess vital signs	Completion of 1
Perform a Comprehensive Physical Assessment	Completion of 1
Perform CPR - adult	Completion of 2
Perform CPR - pediatric	Completion of 2
Perform CPR - neonate	Completion of 2

### Affective Grading Rubric

### **Axon** Education

#### Axon Education Consortium Affective Grading Rubric

Date:

Student Name: Affective Domain Evaluator:

1. Integrity       Always honest, leads by example and models exemplary behaviors regarding integrity. Consistent honesty, assists other classmates in able to be trusted with understanding confidential information, complete and accurate from to due date.       Consistent honesty, assists other classmates in able to be trusted with understanding confidential information, complete and accurate prior to due date.       Major infractions of 1 (or more) areas of #3 or many minor infractions of 1 (or more	Performance Level Ratings	5 – Excellent	4- Good	3- Fair	2 – Poor	1 - Unacceptable	Recommended Score
2. Empathy         Seeks out opportunities to serve in the community, when the situation arises can provide contact information on assistance agencies, has the ability to their         Able to show compassion and respond appropriately while maintaining professional demeanor, agencies, has the ability to their         Able to show compassion and respond appropriately others, responses by others, demonstrating a strong agencies, has the ability to their         Being uncompassionate to others, responding inappropriately to emotional encompassionate to others, responding appropriately to emotional demonstrating responses by others, demonstrating resport to others, being supportive and reasuring.         Being deliberately disrespectful others, making fun of others, learly uncomformable with their emotional displays. Acting colly towards patients in distress and not acting as a patient advocate.         Being deliberately disrespectful of others, making fun of others, learly uncomfortable dealing with emotions of patients.           0	1. Integrity	example and models exemplary behaviors regarding integrity. Consistently turns in paperwork that is complete and accurate prior to due	assists other classmates in understanding confidential issues and in developing their documentation skills.	able to be trusted with property and confidential information, complete and accurate documentation of patient care and learning	#3 but otherwise compliant	areas of #3 or many minor infractions	0
serve in the community, when the situation arises can provide contact information on assistance ease and actively listens to their	Score for 1.						
	2. Empathy	serve in the community, when the situation arises can provide contact information on assistance agencies, has the ability to set troubled patients at ease and actively listens to their	and respond appropriately while maintaining professional demeanor, demonstrating a strong desire to advocate for the patient, can direct patients and their families to available	others, responding appropriately to emotional responses by others, demonstrating respect to others, being supportive and	others or responding inappropriately to emotional responses because you are unconformable with their emotional displays. Acting coolly towards patients in distress and not	of others, making fun of others, being condescending or sarcastic to others, clearly uncomfortable dealing	0





3. Self-Motivation	Never missing a deadline	Occasionally completing	Taking initiative to complete	Failing to meet 1-3 tasks as	Consistently failing to meet	
	and often completing		assignments, taking initiative	described in #3 but obviously	established deadlines, unable to	
	assignments well ahead of		to improve or correct	making attempts to attain	demonstrate intrinsic motivating	
	deadlines, reminding other		behavior, taking on and	acceptable standards.	factors requiring extra extrinsic	
	students of deadlines,		following through on tasks		motivation from instructors,	
	supporting faculty in		without constant supervision,		failing to improve even after	
	upholding the rules and	excellence in all aspects of	showing enthusiasm for		corrective feedback has been	
	regulations of the program,	patient care and	learning and improvement,		provided by faculty, requiring	
	taking seriously	professional activities,	consistently striving for		constant supervision	0
	opportunities to provide	seeking out a mentor or	improvement in all aspects of		to complete tasks or being asked	U
	feedback to fellow	faculty member to provide	patient care and professional		to repeat a task that is	
	students, seeking	constructive criticism,	activities, accepting		incorrectly performed.	
	opportunities to obtain	informing faculty of	constructive criticism in a			
	feedback, assisting faculty	learning opportunities.	positive manner, taking			
	in arranging and		advantage of learning			
	coordinating activities.		opportunities.			
Score for 3.						
4. Appearance and	Uniform is always above	Clothing and uniform are	Clothing and uniform is	Appropriate clothing or	Inappropriate uniform or clothing	
Personal Hygiene	average. Non-uniform	above average. Uniform is	appropriate, neat, clean and	uniform is selected for a	worn to class or clinical settings.	
,	clothing is business-like.	pressed and business	well-maintained, good	majority of the time, but the	Poor hygiene or grooming.	
	Grooming and hygiene is	casual is chosen when	personal hygiene and	uniform may be unkempt		
	impeccable. Hair is worn in	uniform is not worn.	grooming.	(wrinkled), mildly soiled, or in		
	an appropriate manner for	Grooming and		need of minor repairs,		
	the environment and	hygiene is good or above		appropriate personal hygiene		0
	student is free of excessive	average.		is common, but		
	jewelry. Make-up and			occasionally the individual is		
	perfume or cologne usage			unkempt or disheveled.		
	is discrete					
	and tasteful.					
Score for 4.						

5. Self-Confidence	Stands by and can defend	Stands by his/her choices	Demonstrating the ability to	Needs encouragement before	Does not trust personal	
	personal choices when	when challenged by an	trust personal judgment,	not trusting personal	judgment, is unaware of	
	challenged by an authority	authority figure, aware of	demonstrating an	judgment, is aware of	strengths or	
	figure, actively seeks to	strengths and weaknesses	awareness of strengths and	strengths but does not readily	weaknesses, and frequently	
	improve on weaknesses,	and seeks to improve,	limitations, exercises good	recognize weaknesses,	exercises poor personal	
	seeks out opportunities to	exercises	personal judgment.	sometimes makes poor	judgment.	0
	assist other classmates in	good personal judgment		personal choices.		
	developing their self-	and often serves as a				
	confidence.	mentor for classmates.				
Score for 5.						
6. Communication	Working on self and	Working on improving	Speaking clearly, writing	Needs work to speak or write	Unable to speak or write clearly	
Skills	assisting classmates in	speaking and writing	legibly, listening actively,	clearly, knows how to actively	and is unable to correct their	
	improving speaking and	abilities, models active	adjusting	listen although sometimes is	behavior despite intervention by	
	writing abilities, models and	listening skills, able to	communications strategies	unable to model good listening	instructors, does not actively	
	is able to demonstrate	modify communication	to various situations.	skills, able to identify	listen (requires instructions to be	
	active listening techniques	strategies easily in various		alternative communication	repeated or appears unable to	
	to other students, is	situations and able to		strategies needed in various	follow directions,)	
	comfortable utilizing a	effectively communicate a		situations but is still	resistant to learning new	0
	variety of communication	message in		developing the skill to perform	communications strategies.	
	styles, may have	these various settings.		alternative		
	proficiency in another			strategies.		
	language,					
	including sign language.					
Score for 6.						
	Punctual (or early) nearly	Seldom late to class or	Consistent punctuality,	Occasionally late in arriving to	Often late to class or clinical	
	100% of the time,	clinical, generally ready to	completing tasks and	class or clinical sites,	sites, upon arrival needs	
	completes tasks and	begin class or clinical prior	assignments on time.	occasionally late	additional time to be ready to	
	assignments prior to the	to the actual start time,		in turning in assignments or	begin (changing into uniform,	
	due date, seldom requires	completes tasks and		requires reminding about	gathering supplies, etc.),	
	reminding about deadlines	assignments by due date		deadlines.	frequently late in turning in	
	or due dates, may assist	(and occasionally in			assignments, requires constant	0
	instructor in reminding	advance of due date) with			reminders	
	classmates	minimal			about due dates and will blame	
	about due dates.	need for reminders of due			others if a due date is missed.	
		dates.				
Score for 7.						



8. Teamwork and Diplomacy	Placing success of the team above self interest (even if that means a negative outcome to self,) taking a leadership role and using good management skills while leading, involving all appropriate team members in the decision making process, suggesting and implementing changes to benefit the team, seeking ways to keep communications and dialogue going.	actively seeking to include all members of the team in decision making processes were appropriate, welcoming change and remaining flexible, helping to open the lines of	team above self interest, not undermining the team, helping and supporting other team members, showing respect for all team	Sometimes acting for personal interest at the expense of the team, acting independent of the team or appearing non- supportive, being somewhat resistant to change or occasionally unwilling to work out a solution.	Manipulating the team or acting with disregard to the team, being disrespectful of team members, being resistant to change or refusing to cooperate in attempts to work out solutions.	0
Score for 8. 9. Respect	in volatile situations, able to take abusive language or disrespect from patients without reacting negatively towards the individual,	his/her favor, always using respectful language	Being polite to others, not using derogatory or demeaning terms, behaving in a manner that brings credit to the profession.	Being polite when required, occasionally overheard using demeaning or derogatory language but confining it to situations other than in patient care settings, occasionally acting unprofessional on the job.	Disrespect of authority, being argumentative, using inappropriate words or outbursts of anger, deliberately undermining authority in words or actions or trying to provoke others, frequently unable to act in a professional manner.	0
Score for 9. 10. Patient Advocacy	Models patient advocacy	Not allowing personal bias	Not allowing personal bias or	Occasionally has difficulty	Unable to deal with patients	

Is patient advocacy able to defend the to advocate for to advocate patient care despite strong negative feelings or interfere with independent of subation, runities to help fellow independent of to interfere with patient care despite strong patient care. (advocate) patient confidentiality and dignity. (advocate) patient confidentiality. (advocate) patient confidentiality. (advoca
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Updated 7/10/2024



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Score for 11.						
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General Comments:						
						1
Signature of Person Comp	leting Form:		Date			
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