LAKES REGION COMMUNITY COLLEGE

379 Belmont Road Laconia, NH 03246 (603) 524-3207

COURSE OUTLINE/SYLLABUS SHEET

• **COURSE NO:** FIRE225L

• **COURSE TITLE:** Emergency Medical Technology – EMT

• **CREDIT HOURS:** 3

• **SEMESTER:** Fall 2021

• **INSTRUCTOR NAME:** Raelyn M. Cottrell, M.Ac., AEMT, NH I/C #50250, RMT Phone numbers 603-393-2372

• E-MAIL ADDRESS: rcottrell@ccsnh.edu

• **OFFICE LOCATION:** Room 149

• **CONFERENCE HOURS:** By appointment only.

• **PREREQUISITES:** Approval of department chair for non-Fire Science students.

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

• TEXT/INSTRUCTIONAL MATERIALS AND EQUIPMENT NEEDED:

Mandatory Resources: Emergency Care, 13th Edition Brady

Mandatory Materials: Personal stethoscope, BP cuff, pocket mask with Oxygen outlet

(Approx. \$60). Must have by 10/01/21.

Optional Materials: American Heart Association Healthcare Provider Text (\$20.00), EMS Field

Guide (\$18.00), via retail sources.

• COURSE PREREQUISITES:

- 1. Must be 18 prior to the completion of the course and possess a high school diploma or GED equivalency.
- 2. Must be enrolled as a student at LRCC Laconia.
- 3. Must furnish information regarding any felony conviction since age 18. (Information required 90 days prior to the National Registry of EMT's exam in order to be eligible to take the exam and apply for NH licensure.)
- 4. Must complete a professional rescuer basic cardiac life support (CPR) course prior to 10/01/21.
- **GRADING:** The following criteria will determine your grade for the course:

Category	Percentage of Course Grade					
Quizzes	15%					
Mid-Term Exam	20%					
Final Exam	20%					
Project	10%					
Worksheets	10%					
PCR's	5%					
Class Participation	20%					

Each of these categories is described below. You are responsible to be aware of this information at all times in the course. All assignments will be graded and when appropriate returned to you on a timely basis; therefore, you are expected to keep track of your own grade.

Homework (worksheets & PCR's) must be completed and handed in by the <u>due date</u>. Homework is graded based on effort, completeness, and timeliness. The last page of this document is a course schedule that lists homework due dates. <u>No late homework will be accepted for any reason.</u> You should use the homework assignments to become familiar with the information discussed in lecture and to use as a study guide for the following weeks quiz or test.

Weekly Quizzes will be given on the off weeks of tests. These quizzes will be from the homework you have completed and from the previous week's lessons. There will be no make-up quizzes given for any reason; therefore, a grade of 0 will be averaged into your course grade if you are absent on that day.

Class Participation is required in any practical based class. There will be individual and group activities in some classes. **Your full participation is expected in every class.** Your participation includes your effort on all assignments, quizzes, tests, and the mid-term and final exams. It also includes your attendance.

Tests must be taken on the scheduled dates. NO make-up exams will be given for any reason; therefore, a grade of 0 will be averaged into your course grade if you are absent on the day of the exam. The Final Exam covers all the material in the entire course.

Each student is assumed to be earnestly working to the best of his or her ability in the course. It is the student's responsibility to be aware of his/her progress, and initiate a request for help. The instructor is available by appointment or from 9am to 9pm via telephone Monday through Saturday or via email or text daily to assist students. Students should ask for help as soon as possible, the college has many resources available to assist students.

• GRADING SCALE:

• **NEED FOR ASSISTANCE:** Sometimes additional time or one-on-one assistance is needed. I am normally available during the conference hours by appointment or via Email. I am available by telephone between 9AM – 9PM, Monday through Saturday. Also, remember the Teaching and Learning Center offers tutoring and individual consulting. If you need assistance in accessing this help, please let me know ASAP.

Free peer tutoring is available for students enrolled in courses at LRCC-Laconia. Students needing tutoring services should come to the Learning and Career Center (LCC) Office and fill out the "Request for Tutoring" form (the pink form). Tutors are available for most courses including math, college writing, accounting, computers and business management. Peer tutors are students who have successfully completed the courses in which they are tutoring or have proven expertise on the subjects. Tutoring sessions are on a one-to-one basis and allow students to ask questions, learn at their own pace, and receive immediate feedback.

• COURSE OUTCOMES/COMPETENCIES:

At the conclusion of this course, the student will be able to (but not limited to the following):

- Understand Emergency Medicine, its ethical issues, and its medico-legal issues
- Know the Human Body
- Lift and Move patients without risk to themselves
- Perform defibrillation and CPR effectively
- Perform BLS airway management and oxygen therapy
- Perform Patient Assessment skills including trauma and medical assessments
- Document and Communicate effectively with and for every patient
- Use medications within their scope of practice
- Effectively treat respiratory, cardiac, abdominal, diabetic, allergic, poisoning, overdose, environmental, geriatric, OB/GYN, pediatric and behavioral emergencies
- Effectively treat bleeding, shock, soft tissue, musculoskeletal, head, neck & spinal emergencies
- Perform splinting and boarding skills
- Perform ambulance operations effectively
- Understand the importance of HIPAA
- Perform special operations and rescue operations when appropriate
- Understand the use of alternative therapies
- Understand EMS response to terrorism
- Understand ALS airways and perform certain skills to assist with ALS providers

(This is a State of New Hampshire Department of Safety, Division of Emergency Medical Services approved course. It meets or exceeds the minimum USDOT EMT curriculum requirements, as adopted in 2021 and authorized by the NH Bureau of EMS, the NH Board of Medical Control Physicians and the NH Fire Standards and Training. It is designed to give students a solid foundation in the field of emergency medicine.)

• ATTENDANCE (excerpted from College Student Handbook):

Successful college students attend class regularly. Most failures, dropped courses and poor grades result from poor attendance. The college has designed a schedule of classes for each course that meets the Carnegie unit definition of class time necessary for the average college student to complete the course. This time at the college, under the supervision of a professional educator, contributes to academic success. Students who elect not to attend all scheduled classes or laboratory hours should notify and consult with the instructor of the course for special instructions. Students should in all cases notify and consult with their instructor on all absences. Absence for any portion of scheduled class time may constitute an absence. In some cases students must keep their own attendance records because a financial sponsor requires this for use in advising and recommending students to employers. The instructors will make every effort to accept advance notices of absences due to college events and/or emergencies. It is, however, ultimately the student's responsibility to make arrangements for missed assignments, tests, lectures, deadlines and other academic activities associated with the lack of attendance.

The college encourages attendance in class for several reasons:

- 1._There is a strong correlation between attending classes and academic success.
- 2. Material may be available in class that is not in the textbook.
- 3._Class time has been assigned to each student and that is their time to receive instructor assistance, which is important to the successful completion of the course requirements.
- 4._Much learning takes place between faculty and students during class. This time is also a chance for students to think, question and clarify ideas and information.
- 5._Each individual is expected to make satisfactory progress in classes. Attendance is important so the faculty can assist the student in making satisfactory progress.
- 6._Students who are not making satisfactory progress should, with the consensus of instructor and advisor, drop the course during the drop period.

 Registration for any course presupposes that the student will attend all scheduled classes, laboratories, and clinics. Any student who does not attend the first class of the semester and has not processed a course drop in writing with the registrar's office will be removed from the class roster; however, the student is still responsible for tuition and fees. Each student is responsible for meeting all class requirements. For an absence rate that reasonably precludes making up missed coursework, barring mitigating factors such as major illness, accident or family emergency, faculty may process an administrative failure form with the Registrar's Office or award a final grade of AF at the end of the term.

<u>INSTRUCTORS POLICY:</u> Any missed work and time must be made up with the <u>instructor prior to the Final Exam. The NREMT requires that all EMT students must</u> complete a minimum of 150-190 hours in order to sit for their National Exam.

- ACADEMIC HONESTY: Original thinking and intellectual honesty are central to a college
 education. Research projects require the ongoing use of existing works, but students must conduct
 themselves with proper regard for the rights of others and of the college, in a context of mutual
 respect, integrity and reason. Activities such as plagiarism and cheating are not acceptable and will
 not be condoned by the college. Students involved in such activities are subject to serious
 disciplinary action.
- OTHER FEES REQUIRED FOR TESTING: NREMT Application Fee \$80.00; NREMT Practical Exam Fee \$60.00 (subject to change). Money Orders or Cash, no personal checks.
 ALL FEES MUST BE PAID BY December 01, 2021 to test for the NREMT.
 CRIMINAL BACKGROUND investigation also needs to be complete prior to any clinical being started and turned into Raelyn by September 15, 2021.
- **LAB INSTRUCTORS:** Brian Cottrell, AEMT/FF2; Matt Cole, NREMT-P/FF2; Erin Hannafin, EMT/FF2; Tim Robbins, NREMT-P/FF2; Donnie Harpell, NREMT-P/FF2; Tim Baldassare, NREMT-P/FF2

• OTHER REQUIREMENTS:

Maintain Ethical Behavior and LRCC Honor Code: Grounds for immediate dismissal are confirmed privacy/confidentiality violations, cheating, lying, stealing, abusive behavior, gender harassment and/or inappropriate touching at any point throughout the course or in the clinical setting. The Code of Ethics in the LRCC Student Handbook shall govern any grievance process. If acts are upheld, student(s) will be dismissed with prejudice and report of conduct will be filed with the NH Bureau of EMS as per RSA153:A, recommending said student(s) not be allowed to challenge any EMT Curriculum in this state, with any other program.

Dress Code: There is a great deal of physical labor associated with this course. The wearing of appropriate clothing is a SAFETY ISSUE. In other classes, such as Firefighting I, clothing requirements are appropriate to the environment (turnout gear, helmets, etc.). Therefore, the following SOP will be in effect for the duration of the course, due to the nature of some practical assignments involving physical patient assessment, out-of-door work, splinting, and/or scenario involvement:

The preferred dress is department/service work shirt and pants, or T-shirt/sweatshirt and jeans/sweatpants/knee length shorts. Street clothing may be worn, but should be of such a nature that practical assignments will be not be in danger of ruining something precious to you. No torn, ripped, or offensive clothing, no hats are to be worn in the classroom. Shoes should be boots or athletic shoes, no flip flops, sandals, high heels or clogs allowed. This applies to both classroom and clinical settings.

All students are required to wear appropriate undergarments, to include bras and underpants. Bare mid-drift tops, halter-tops, tank tops, "wife beaters" or other revealing garments are NOT to be worn. Students coming to class in such dress will be sent home and given a "ZERO" for the day, if unable to return within a reasonable time period. Hoop earrings are not allowed; other types of ear jewelry, piercings, necklaces or bracelets are discouraged.

Patient Assessment Skills Practice:

In the course of learning to be an EMT, students will be required to physically touch one another during assessment practice, taking of vital signs, assessment of lung sounds, and splinting skills. While I am sensitive to issues of inappropriate touching (see Honor Violations, above), it is an absolute must that students become comfortable with appropriate physical contact, for both their patients and their partners well being.

To accommodate issues of physical privacy, students might be asked to wear a t-shirt and gym shorts, etc., under their clothing on some days. **No** TWO PIECE bathing suits or THONGS are to be worn on those days - male or female.

<u>Cell Phones & Other Electronic Devices:</u> All cell phones, pagers, etc. must be on silent mode when in the classroom at all times. These devices should be kept in your pocket, backpack or car and only checked during break times. If you are using an electronic device for taking notes, it must be for note taking ONLY. You may not be surfing the web, on social media, etc. when in the classroom.

<u>Instructor satisfaction:</u> The field of Prehospital Emergency Medicine is <u>not</u> a playground for people with "Red lights and siren disease" or "911 syndrome". Neither is EMS "part-time-until-I-find-another-job" endeavor, nor is it a **sideline** to firefighting. **IT IS A MEDICAL PROFESSION**.

The fact is, those of you pursuing a career in the Fire Service are required to be knowledgeable and skilled in the art of Emergency Medicine. It will comprise (by national statistic) 78% of your future job duties; thus, when pursuing a career in EMS one will need good reading skills, critical thinking skills and high ethical standards. People's lives and privacy will depend upon your skill and knowledge, as well as your professionalism. No matter how well you do academically in this course, the State of NH grants me the right to decide whether or not you are mature or emotionally stable enough to be permitted to practice prehospital medicine in New Hampshire, or anywhere else.

For the record, the following is my policy, as your Instructor/Coordinator:

Certification by the National Registry of EMT's is a de-facto requirement for the practice of pre-hospital medicine in all but four states in this country. Therefore, it is assumed all students will challenge this process at the end of the course, or within one year of completion. (Failure to do so would mean you will have to repeat the course in its entirety.)

If a student does not successfully demonstrate appropriate academic and/or practical skill, as well as a maturity level that makes me professionally comfortable with the fact that he/she could end up one day taking care of myself or my family members, I reserve the right to refuse such person National Registry of EMT's candidacy and/or to issue a course completion certificate which would allow them to practice in any other state, even though he/she may pass the course for academic credit at LRCC.

If a student does not complete all components of the course, including the clinical component, the student will receive a grade of F for the college course. If student completes ALL work, then the instructor will complete a Change of Grade and submit to the Registrar. If student does not complete ALL work, this would mean you will have to repeat the course in its entirety. See your college handbook for a complete description.

- CRITERIA FOR SUCCESSFUL COURSE COMPLETION, DOT CERTIFICATE AND PERMISSION TO CHALLENGE THE NH BUREAU OF EMS AND NATIONAL REGISTRY OF EMT'S EXAMINATIONS:
 - 1. Maintain 75% overall average on ALL Quizzes.
 - 2. Pass written Mid-term and Final Exams with an 80% or better (one re-take only, if student still does not pass either with an 80% or better after 2 tries, student will be dismissed from the course).
 - 3. Pass In-Course Final Practical Examination to meet NHBEMS standards.
 - 4. Complete twenty (20) hours of clinical time, at least 10 MUST be in a hospital emergency room and the other 10 either on an ambulance or in a hospital emergency room. During this clinical time, students are required to complete 10 patient assessments. Location must be supplied to the instructor & clinical coordinator prior to 10/07/21. Clinical time may be started after passing the mid-term exam with an 80% or better on 10/14/21. ALL CLINICAL TIME MUST BE COMPLETED BY 12/01/21 (IF, clinical is NOT complete at or before final exam, student may be dropped from the course).
 - 5. Complete six PCR's: 3 written & 3 TEMSIS (Patient Care Records, either from clinical or in-course scenarios/assessments/information.)
 - 6. Complete all reading assigned PRIOR to class day in which to be discussed.
 - 7. Complete all required NH/BEMS skills during class time.
 - 8. Complete student worksheets. Worksheets will be checked every week.
 - 9. **Miss no more than one class day or 8 hours total class time.** Any missed hours must be made up via outside work with Instructor or in another EMT-Basic course. There are absolutely NO exceptions. If you are more than 10 minutes late, please do NOT disturb the class; wait to enter the classroom during the next break. If you are late more than 2 times it will count as an absence and you will need to make up 7 hours of class time. (IF a student misses more than 8 hours of class time, the student may be dropped from the course).
 - 10. Actively participate in class practicals and lectures.
 - 11. **Complete Project**; Due the week of December 02, 2021.
 - 12. Students must provide the instructor proof of the following vaccinations: HEP B, Tetanus (within 10 years), 2 step TB/PPD(within 1 year), MMR, and Chicken Pox Vaccine or verification of the disease. ALL Vaccinations must be turned in no later than 10/01/2021 (IF, vaccinations are NOT supplied to instructor at or before mid term exam, student may be dropped from the course).
 - 13. Students must provide instructor proof of **criminal background investigation by 10/01/2021.** This is a requirement for clinical in all hospitals. Student will NOT be released for clinical until this is presented to instructor.
 - 14. Student <u>must</u> complete and show completion certificates to the Instructor of the following courses: NIMS, ICS & HAZMAT. All certificates <u>must</u> be shown to Instructor on or before 11/30/2021.

observation time will leave the student subject to Admin		
Instructor as last resort for granting possibility of repea	ting course at a later da	<u>ate</u>
Raelyn M. Cottrell, M.Ac, AEMT, NH I/C #50250 LRCC Emergency Medical Technologies Instructor	6/2021	
EXCC Emergency Medical Technologies histractor	0/2021	

NREMT Accommodations Disability Policy

Examination Accommodations Disability Policy

The National Registry of EMTs offers the following recommendations regarding the EMT program application process:

The National Registry of EMTs recommends that all applicants to EMT programs complete an appropriate standardized aptitude test battery (such as the General Aptitude Test Battery (GATB), Differential Aptitude Test Battery, Apticom etc.) and a standardized test of reading achievement. Aptitude Batteries such as the GATB assess capacities and abilities necessary to competently perform the responsibilities of the EMT such as: learning ability, verbal, numerical and spatial ability; form and clerical perception, motor coordination; finger and manual dexterity; eye-hand-foot coordination, color discrimination. In instances where Test Batteries are not given prior to admission into EMT training programs, NREMT recommends that such tests be administered at appropriate times as determined by state/training program policies. NREMT also recommends that vocational counselors be available to applicants to interpret the results of testing and provide guidance in terms of advisability of proceeding with the EMT training program.

Eligibility for Accommodations for Registration Due to Disability

The National Registry of EMTs will offer reasonable and appropriate accommodations for the written component of the registration examination for those persons with documented disabilities.

I. Learning Disabilities

Those persons requesting accommodations for the written component of the registration examination must submit documented evidence of a learning disability. Appropriate documentation must be submitted by the applicant and must be received three to four weeks prior to the examination.

Based upon a thorough analysis of the written examination it has been determined that persons with learning disabilities in the areas of reading decoding, reading comprehension, or written expression may be eligible for special test accommodations. Other areas in which learning disabilities may be evidenced (e.g. mathematics calculations, mathematics applications, oral expression, listening comprehension) should not negatively impact upon one's performance on the written examination due to the format (multiple choice) and content.

Documentation of a specific learning disability must include one of the following:

- 1. Evidence of a previously documented learning disability in reading decoding, reading comprehension, or written expression. Such documentation is described as follows:
 - a. Diagnosis of a learning disability in the area(s) of reading decoding, reading comprehension and/or written expression, based upon the results of standardized psycho educational assessment including an Individually administered standardized measure of intelligence and an individually administered standardized measure of achievement in reading decoding, reading comprehension and/or written expression. All persons requesting special accommodations for the written examination will be required to submit the scores obtained on individually standardized measures of intelligence and achievement. Both standard scores and grade equivalent scores are required.
 - b. A learning disability diagnosis should be made by a qualified professional, according to the criteria outlined in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV; American Psychiatric Association, 1994).
 - c. The following should also be included in the documentation: developmental and academic history, current cognitive functioning, thorough investigation of deficit areas; reasonable consideration of alternative diagnosis and co-morbidity, and rationale for diagnosis.
 - d. Results of previous psycho educational evaluations and IEPs (Individual Education Plan) will be helpful information to include. However, a recent evaluation (within the past five years) must be included. If no such assessment has been conducted, then the applicant is responsible for obtaining such documentation before any decision can be made by the National Registry of EMTs regarding the applicant's request for special accommodations.

No person will be granted special accommodation on the written examination if he/she does not meet the minimum standards for performance as determined by analysis of the requirements of the job and as documented by standardized measures of aptitude and achievement. Please contact the National Registry for further information regarding minimum standards of performance.

Types of Accommodations:

The types of accommodations which may be requested by persons qualifying for special accommodations on the written examination due to documented learning disability in reading decoding and or reading comprehension are as follows:

- 1. The National Registry of EMTs will permit those persons who qualify for special accommodations on the written examination due to a documented learning disability in reading decoding, reading comprehension, and/or written expression to take the standard format of the examination but receive an extended amount of time in which to complete the examination. Applicants selecting this option will normally receive 3.75 hours verses the standard 2.5 hours.
- 2. Additional accommodations may be provided as appropriate.

NREMT Felony Conviction Policy

The NREMT will deny registration or take other appropriate actions in regards to applicants for registration or reregistration when a felony conviction has occurred. Decisions effecting eligibility will be based upon the following categories. Applicants may appeal decisions made by the Registry as outlined in the National Registry of Emergency Medical Technicians Registry Disciplinary Policy.

EMT Certification – Criminal Convictions

Preamble

EMS practitioners, by virtue of their state licensure, certification, or national registration, have unsupervised, intimate, physical and emotional contact with patients at a time of maximum physical and emotional vulnerability, as well as unsupervised access to personal property. In this capacity, they are placed in a position of the highest public trust, even above that granted to other public safety professionals and most other health care providers. While police officers require warrants to enter private property, and are subject to substantial oversight when engaging in "strip searches" or other intrusive practices, EMTs are afforded free access to the homes and intimate body parts of patients who are extremely vulnerable, and who may be unable to defend or protect themselves, voice objections to particular actions, or provide accurate accounts of events at a later time.

Citizens in need of out-of-hospital medical services rely on the EMS System and the existence of state licensure/certification or national registration to assure that those who respond to their calls for aid are worthy of this extraordinary trust. It is well accepted in the United States that persons who have been convicted of criminal conduct may not serve as police officers. In light of the high degree of trust conferred upon EMTs by virtue of licensure, certification, or registration, EMTs should be held to a similar, if not higher, standard. For these reasons, the EMS certifying/licensing/registration agency has a duty to exclude individuals who pose a risk to public health and safety by virtue of conviction of certain crimes.

General Denial

Registration of individuals convicted of certain crimes present an unreasonable risk to public health and safety. Thus, applications for certification by individuals convicted of the following crimes will be denied in all cases.

- 1. Felonies involving sexual misconduct where the victim's failure to affirmatively consent is an element of the crime, such as forcible rape.
- 2. Felonies involving the sexual or physical abuse of children, the elderly or the infirm, such as sexual misconduct with a child, making or distributing child pornography or using a child in a sexual display, incest involving a child, assault on an elderly or infirm person.

3. Any crime in which the victim is an out-of-hospital patient or a patient or resident of a health care facility including abuse, neglect, theft from, or financial exploitation of a person entrusted to the care or protection of the applicant.

Presumptive Denial

Applications for registration by individuals in the following categories will be denied except in extraordinary circumstances, and then will be granted only if the applicant establishes by clear and convincing evidence that certification will not jeopardize public health and safety.

- 1. Applications for certification by individuals who have been convicted of any crime and who are currently incarcerated, on work release, on probation or on parole.
- Application for certification by individuals convicted of crimes in the following categories unless at least five years have passed since the conviction OR five years have passed since release from custodial confinement whichever occurs later:
 - Serious crimes of violence against persons, such as assault or battery with a dangerous weapon, aggravated assault and battery, murder or attempted murder, manslaughter except involuntary manslaughter, kidnapping, robbery of any degree; or arson.
 - b. Crimes involving controlled substances or synthetics, including unlawful possession or distribution, or intent to distribute unlawfully, Schedule I through V drugs as defined by the Uniform Controlled Dangerous Substances Act.
 - Serious crimes against property, such as grand larceny, burglary, embezzlement or insurance fraud.
 - d. Any other crime involving sexual misconduct.

Discretionary Denial

Applications for registration by individuals convicted of any crimes including DUI, but not including minor traffic violations may be denied after consideration of the following factors.

- 1. The seriousness of the crime.
- 2. Whether the crime relates directly to the skills of prehospital care service and the delivery of patient care.
- 3. How much time has elapsed since the crime was committed.
- 4. Whether the crime involved violence to, or abuse of, another person.
- 5. Whether the crime involved a minor or a person of diminished capacity.
- 6. Whether the applicant's actions and conduct since the crime occurred are consistent with the holding of a position of public trust.

US Department of Transportation Job Description

Emergency Medical Technician -Basic

Responds to emergency calls to provide efficient and immediate care to the critically ill and injured, and transports the patient to a medical facility.

After receiving the call from the dispatcher, drives the ambulance to address or location given, using the most expeditious route, depending on traffic and weather conditions. Observes traffic ordinances and regulations concerning emergency vehicle operation.

Upon arrival at the scene of crash or illness, parks the ambulance in a safe location to avoid additional injury. Prior to initiating patient care, the EMT-Basic will also 'size-up' the scene to determine that the scene is safe, the mechanism of injury or nature of illness, total number of patients and to request additional help if necessary. In the absence of law enforcement, creates a safe traffic environment, such as the placement of road flares, removal of debris, and re-direction of traffic for the protection of the injured and those assisting in the care of injured patients.

Determines the nature and extent of illness or injury and establishes priority for required emergency care. Based on assessment findings, renders emergency medical care to adult, infant and child, medical and trauma patients. Duties include but are not limited to, opening and maintaining an airway, ventilating patients, and cardiopulmonary resuscitation, including use of automated external defibrillators. Provide prehospital emergency medical care of simple and multiple system traumas such as controlling hemorrhage, treatment of shock (hypo perfusion), bandaging wounds, and immobilization of painful, swollen, deformed extremities. Medical patients include: Assisting in childbirth, management of respiratory, cardiac, diabetic, allergic, behavioral, and environmental emergencies, and suspected poisonings. Searches for medical identification emblem as a clue in providing emergency care. Additional care is provided based upon assessment of the patient and obtaining historical information. These interventions include assisting patients with prescribed medications, including sublingual nitroglycerin, epinephrine auto-injectors and hand-held aerosol inhalers. The EMT-Basic will also be responsible for administration of oxygen, oral glucose and activated charcoal.

Reassures patients and bystanders by working in a confident, efficient manner. Avoids mishandling and undue haste while working expeditiously to accomplish the task.

Where a patient must be extricated from entrapment, assesses the extent of injury and gives all possible emergency care and protection to the entrapped patient and uses the prescribed techniques and appliances for safely removing the patient. If needed, radios the dispatcher for additional help or special rescue and/or utility services. Provides simple rescue service if the ambulance has not been accompanied by a specialized unit. After extrication, provides additional care in triaging the injured in accordance with standard emergency procedures.

Complies with regulations on the handling of the deceased, notifies authorities, and arranges for protection of property and evidence at scene.

Lifts stretcher, placing in ambulance and seeing that the patient and stretcher are secured, continues emergency medical care.

From the knowledge of the condition of the patient and the extent of injuries and the relative locations and staffing of emergency hospital facilities, determines the most appropriate facility to which the patient will be transported, unless otherwise directed by medical direction. Reports directly to the emergency department or communications center the nature and extent of injuries, the number being transported, and the destination to assure prompt medical care on arrival. Identifies assessment findings, which may require communications with medical direction for advice and for notification that special professional services and assistance be immediately available upon arrival at the medical facility.

Constantly assesses patient en route to emergency facility, administers additional care as indicated or directed by medical direction.

Assists in lifting and carrying the patient out of the ambulance and into the receiving facility.

Reports verbally and in writing their observation and emergency medical care of the patient at the emergency scene and in transit to the receiving facility staff for purposes of records and diagnostics. Upon request, provides assistance to the receiving facility staff.

After each call, restocks and replaces used linens, blankets and other supplies, cleans all equipment following appropriate disinfecting procedures, and makes careful check of all equipment so that the ambulance is ready for the next run. Maintains ambulance in efficient operating condition. Ensures that the ambulance is clean and washed and kept in a neat orderly condition. In accordance with local, state or federal regulations, decontaminates the interior of the vehicle after transport of patient with contagious infection or hazardous materials exposure.

Determines that vehicle is in proper mechanical condition by checking items required by service management. Maintains familiarity with specialized equipment used by the service.

Attends continuing education and refresher training programs as required by employers, medical direction, licensing or certifying agencies.

Meets qualifications within the functional job analysis.

DOT EMERGENCY MEDICAL TECHNICIAN FUNCTIONAL JOB ANALYSIS

(Excerpt on Physical Demands)

Note: In the analyst's opinion, the general environmental conditions in which the EMT-Basic works cannot be adequately assessed in an indoor evaluative environment. The EMT-Basic in an actual work situation can be exposed to any working condition listed above. Because of the variance in climate, environmental conditions and locations in the United States and the infinite possibilities in which an EMT-Basic is expected to provide basic life support, working conditions, at best, may be less than optimal. The EMT-Basic must be able to focus on providing the best care possible in often adverse and dangerous situations. This can include servicing neighborhoods known to have high crime rates and performing optimally in situations where multiple incidents and trauma exist, i.e. a major highway accident that involves numerous persons and vehicles.

The EMT - Basic may be required frequently to walk, climb, crawl, bend, pull, push, or lift and balance over less than ideal terrain, such as an icy highway, muddy ground, dilapidated stairs/flooring and any other scenario or combination of scenarios. The EMT-Basic's job involves very heavy lifting (50 pounds frequently, no maximum) and involves climbing, balancing, stooping, kneeling, crouching, crawling, reaching, handling, fingering, feeling, talking, hearing, and seeing on a frequent basis.

There may also be exposure to a variety of noise levels, which at times can be quite high, particularly when multiple sirens are sounding, and crowds/bystanders/families are upset and may be screaming, crying hysterically, and making demands that may or may not be reasonable.

Physical Demands	S	L	М	Н	<u>v</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	
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Explanation of terms (**Bold** for emphasis and indication of high frequency):

- 1. Strength
- 2. S = Sedentary (10 pounds maximum)
- 3. L = Light work (10 pounds frequently, 20 pounds maximum)
- 4. M = Medium work (25 pounds frequently, 50 pounds maximum)
- 5. H = Heavy work (50 pounds frequently, 200 pounds maximum)
- 6. V = Very heavy work (50 pounds frequently, no maximum)
- 7. Climbing and/or balancing
- 8. Stooping, kneeling, crouching and crawling
- 9. Reaching, handling, fingering and/or feeling
- 10. Talking and hearing
- 11. Seeing USDOT 2002

<u>LRCC – EMT COURSE SYLLABUS – FALL (THURSDAY & 4 SATURDAYS 0900-1530), 2021</u> *ALL READING IS TO BE DONE PRIOR TO THE SCHEDULED DAY OF CLASS (Saturdays subject to change)*

09/02: CLASS MEETING: Course Introductions; Paperwork; and Group Activities; Introduction and Assignment of Project; CH 1-2, APP B; (HW: CH's 1-2 & APP B):

Introduction to Emergency Care, Well-Being of EMT's/Biohazards; CPR/AED Skills Lab

09/9: CH 3 – 4, 15; (HW: CH's 3 - 4, 15):

Lifting & Moving; Medico-Legal/Ethical Issues; Documentation; Communications, Public Health

09/16: CH. 5 – 7; **Quiz 1 (CH 1 - 4, 15)** (HW: CH's 5 – 7):

Medical Terminology; Human Body (Anatomy & Physiology); Pathophysiology & Skills Lab

09/23: CH. 8 & 16; **Quiz 2 (CH 5 - 7)** (HW: CH's 8 & 16):

Life Span Development; Critical Thinking & Decision Making; General Pharmacology

<u>09/25</u>: CH. 9 – 10; **Quiz 3 (CH 8 & 16)** (HW: CH's 9 – 10):

BLS Airway Management; Respiration & Artificial Ventilation & Skills Lab

10/01: VACCINATIONS, CRIMINAL BACKGROUND, CPR, DRIVERS LICENSE AND AFFILIATION VERIFICATION OR HPSO DUE

09/30: CH. 11 - 14; **Quiz 4** (**CH 9 - 10**) (HW: CH's 11 - 14):

Scene Size Up; Primary Assessment; Vital Signs; Assessment of the Trauma & Medical Patient; Reassessment & Skills Lab

10/07: Review for Mid Term Exam: Quiz 5 (CH. 11 - 14) & SKILLS LAB

Lifting & Moving, Airway, CPR/AED, Vital Signs and Patient Assessment

10/14: **MID TERM EXAM (CH's 1-16)** & Skills Lab:

10/16 & 10/21: CH. 17 – 24; (HW: CH's 17 - 24):

Respiratory & Cardiac Emergencies; Neurology; Diabetic/Altered Mental Status; Allergic Reactions; Behavioral & Psychiatric Emergencies; Poisoning/Overdose; Abdominal, Hematologic, Renal Emergencies; Immunology, Infectious Disease; Endocrine; Non-Traumatic Musculoskeletal Disorders and Diseases of the Eyes, Ears, Nose & Throat & Skills Lab

10/28 & 10/30: CH. 25 - 31; Quiz 6 (CH 17 - 24) (HW: CH's 25 - 31):

Bleeding/Shock; Soft Tissue Injuries; Chest & Abdominal Trauma; Environmental Emergencies; Musculoskeletal; Head, Neck & Spine; Orthopedic trauma; Nervous System Trauma; Special considerations in trauma and Multisystem Trauma Emergencies & Skills Lab

11/04: CH. 32 - 35; **Quiz 7** (**CH. 25 - 31**); (HW: CH's 32 - 35):

OB/GYN; Pediatric; Geriatric Emergencies; Patients with Special Needs & Skills Lab

11/18: CH. 36 – 39; **Quiz 8** (CH. 32 - 35) (HW: CH's 36 - 39):

EMS Operations; Hazardous Materials, Multiple-Casualty Incidents, and Incident Management Highway Safety and Vehicle Extrication; EMS Response to Terrorism & Skills Lab

11/20: SCENARIO DAY & SKILLS LAB

12/02: PROJECT WEEK & ICS, NIMS & HAZMAT DUE & FINAL EXAM REVIEW; Quiz 9 (CH 36-39):

12/09: **FINAL EXAM (CH. 1-39):**

AM: FINAL WRITTEN EXAM & PAPERWORK PM: FINAL PRACTICAL EXAM

12/16: **NREMT EXAM**

TBD: PRACTICAL EXAM PRACTICE (App. B/ NH Skill Sheets):

TBD: 0800-1500 (approx) NREMT-BASIC PRACTICAL EXAM (DATE PENDING)