



**EMTS Academy
Course Catalog
Student Handbook
Fair Practices**

**Revised August 4th, 2022
Effective until revised**

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GENERAL INFORMATION

Preamble

This program provides professional level education to potential EMS providers. It is the expectation of the Program Director that throughout the entire course the student displays a professional attitude to the instructors, classmates, clinical supervisors, other medical professionals, patients and patient families/friends. Program officials, not the student, will set the standards of professionalism of the EMS community. Anyone currently involved with this program may be judged by the performance of all other persons currently, or previously associated with the program. The success of the students during the current course has direct bearing on subsequent classes. Sexual, racial, religious, and/or physical harassment, discrimination, use of intoxicating substances or possession of illegal drugs during any scheduled activity are grounds for removal from this program, as consistent with Emergency Management Training and Services Policies & Procedures. These policies will be available at all education locations.

The rules presented in this document are strictly enforced. As the instructors are reasonable people, any extenuating circumstance, communicated at the time of occurrence will be considered when determining corrective actions. All instructors have the responsibility to respect these rules as well. In the internship locations, the designated responsible party will have full authority to enforce these policies.

Regardless of the written language, students must present themselves as professionals at all times as a member of an elite community. In the event a situation arises which is not covered by the language of the policies and procedures, students and instructors will be guided by best judgment, best practices, professional ethics, and the intent of the current written policies and procedures.

EMTS Academy Dates and Hours of Operation

While EMTS Academy is located at the Texas State University Round Rock (TXSTRR) campus, we are a separate entity from Texas State and therefore our hours of operation differ from TXSTRR and yet are affected by TXSTRR classes.

EMTS administrative offices are open Monday-Friday from 10 am – 4:30 pm. During this time, someone from administration is in the office to answer questions or take telephone calls.

The Texas State University Round Rock campus is normally open from 8 am – 10 pm Monday-Thursday. Campus closes at 5 pm on Fridays and hours vary on the weekend. All students and instructors are asked to be out of the building **as soon as possible after** 10 pm to prevent any conflicts with the Texas State University Police Department and to abide by our contract with the University.

The building has limited hours in-between semesters. For more information, check with the Program Administrator for specific dates and times affected by this.

Accreditation Status of St. David's Round Rock Medical Center

St. David's Round Rock Medical Center is our training partner and sponsor for the Paramedic program. The Joint Commission accredits all St. David's HealthCare facilities. The Joint Commission (TJC) is an independent, not-for-profit organization established over 50 years ago. TJC is the world leader in evaluating the quality and safety of care delivered in over 17,000 health care organizations across the country- from hospitals to home care providers, nursing homes, assisted living facilities, outpatient clinics, behavioral health centers, critical access hospitals and health care networks.

TJC is governed by a board that includes physicians, nurses, medical directors, and consumers.

How do I report safety or quality of care concerns?

You may address your safety and quality of care concerns to:

St. David's Round Rock Medical Center - (512) 341-1000

The Joint Commission

Office of Quality Monitoring One Renaissance Boulevard Oakbrook Terrace, IL 60181

Fax: (630) 792-5636

Email: complaint@jointcommission.org

Accreditation Status of the Paramedic Program

EMTS Academy and St. David's Round Rock Medical Center Paramedic Program Consortium is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) upon the recommendation of the Committee on Accreditation of Emergency Medical Services Professions (CoAEMSP).

To contact CAAHEP:

Commission on Accreditation of Allied Health Education Programs

9355 113th St. N, #7709

Seminole, FL 33775

727-210-2350

www.caahep.org

To contact CoAEMSP:

Committee on Accreditation of Emergency Medical Services Professions

8301 Lakeview Parkway, Suite 111-312

Rowlett TX 75088

(214) 703-8445

FAX (214) 703-8992

www.coaemsp.org

Academic Calendar

With limited exceptions, whenever Texas State University Round Rock is closed for holidays and breaks, EMTS Academy is also closed.

See the website for the most up to date Academic Calendar.

Weather closures will be made on a case-by-case basis.

Description of Available Space, Facilities and Equipment

The program is located at Texas State University Round Rock, 1555 University Blvd, Round Rock, Texas 78665. EMTS leases administrative office space, classrooms and laboratory space from Texas State University Round Rock. Each classroom can accommodate up to 25 students and can also be used as lab space. The building is in excellent condition and all needed repairs are promptly done.

Texas State University supplies all tables, chairs, projectors, podiums and dry erase boards. The program owns all medical equipment and supplies. The minimum numbers of supplies required by DSHS are kept on hand and in most cases EMTS exceeds the minimum requirements.

GENERAL POLICIES

Photo/Audio/Video Recording of Classes

EMTS Academy may record both audio and video classes, skills and/or scenarios as a regular part of our classes. These recordings may be used for educational, advertising, and promotional purposes in all conventional and electronic media, and any future media. The recordings may or may not be shared with the students. A Photo/Audio/Video release form is provided in student paperwork during orientation on the first day of class.

Incident Reports

An Incident Report should be completed whenever there is an event, which results in any of the following:

- Personal injury OR
- Injury to another person OR
- Damage to property OR
- Affective domain violations such as falsification of documentation, cheating, or other behavioral concerns.

Under no circumstances will any student write an official incident report or be interviewed by staff regarding unusual events (for example, questions of patient care, inappropriate behavior, accident reports or procedural issues) occurring during the clinical rotation without the permission and/or representation of the clinical coordinator or another EMTS faculty member.

As soon as any danger or threat has passed, the student must complete an incident report outlining the events immediately preceding, during and any action taken following the incident. This report must be submitted to the Program Director as soon as practical.

Recognizing Stress

Students involved in clinical rotations encounter uncontrolled situations. These situations, either individually or through accumulation, can prove difficult to handle for both inexperienced and veteran personnel alike. Students who encounter an emotionally traumatic event or who begin to feel the accumulation of these events, should notify their course instructor or Program Director as soon as possible. Students should be aware that the following may be symptoms of emotional stress:

- Isolation
- Inappropriate use of humor
- Depression
- Difficulty eating/lost appetite
- Irritability with family and friends
- Inability to concentrate
- Indecisiveness
- Difficulty sleeping and nightmares

It is the goal of the EMS Program to provide each student with the tools and resources to deal with emotional stress related to critical incidents.

ADMISSIONS POLICIES

Non-discrimination policy for student admissions

EMTS provides equal opportunity for all applicants for admission, enrolled students, and graduates without discrimination or segregation on the ground of race, color, religion, national origin, sex, age, disability, veteran status, sexual orientation, gender identity, or gender expression. In addition, EMTS provides its faculty and other employees with equal opportunity in hiring, continuation, promotion, and tenure.

Application Process

All students requesting admission to the program must:

- 1) Complete a registration request form
- 2) Pay the registration fee
- 3) Submit an essay with a writing level of at least 8th grade for EMT, 10th grade for Paramedic.
- 4) Complete and submit required student documentation sent from Administration
- 5) Pay the required tuition and fees and
- 6) Submit the immunization records required for their class.

The essay submitted in the online registration request form by the student will be evaluated by administration. An analysis will tell us the student's reading level. A student who does not submit a writing sample of 8th grade or higher will be allowed one opportunity to resubmit the essay. If the second submission does not meet the 8th grade reading level, the student will not be admitted into the program. In this case, the student may apply for admission again for the next semester.

General Admission Policies

All students requesting admission to the program must complete a registration request form, pay an application fee, submit an essay with a writing level of at least 8th grade, schedule a registration appointment, pay the required tuition and fees and submit the immunization records required for their class.

The essay submitted in the online registration request form by the student will be evaluated. An analysis will tell us the student's reading level. A student who does not submit a writing sample of 8th grade or higher will be allowed one opportunity to resubmit the essay. If the second submission does not meet the 8th grade reading level, the student will not be admitted into the program. In this case, the student may apply for admission again for the next semester.

Admission Requirements for All Students

- 1) Students must have a high school diploma or GED.
- 2) Minimum enrollment age is 18.
 - a) However, students who are 17 by the first day of class may sign a waiver for enrollment, but will not be eligible for state certification until age 18.

- b) Students who are currently enrolled in high school must be 17 and have a letter from a school counselor providing the date of expected graduation.
- 3) EMT applicants must pass a 150-word writing sample with a minimum reading and writing level of at least 8th grade.
- 4) Pass a functional job description physical and provide the functional job description physical form signed by a medical professional.
- 5) Pass an American Heart Association Health Care Provider CPR/AED course within 6 months prior to the start date of your EMS course.
 - a) EMTS Academy will offer a CPR class prior to the start of your EMS course. You may sign up for a CPR class during your registration appointment.
 - b) Austin/Travis County EMS CPR also offers classes weekly: (512) 978-0175.
- 6) Meet the requirements for EMS certification of the Texas Department of State Health Services (DSHS) including, but not limited to:
 - a) Successfully passing a national background check.
 - b) Students must not have any criminal history convictions or pending convictions prohibited by DSHS.
- 7) Receipt of Enrollment Policies (Form 005) and record of Previous Education and Training (Form 010) are required to be completed by a VA eligible student and kept in the students' school record. A copy will be given to the student. See Appendix A for these forms.

Students who have concerns about any previous criminal history need to contact DSHS BEFORE registering for an EMTS Academy course.

<https://www.dshs.texas.gov/emstraumasystems/qicriminal.shtm>

EMT Admission Requirements:

A student enrolling in an EMT course must:

- Age 17
- High school *graduate or a GED
 - *High school seniors may be conditionally enrolled in the EMS program. Students must provide verification of enrollment by their high school.
- A student must be 18 years old and hold a high school diploma or GED to become certified as an EMT in Texas
- For courses starting after October 1, 2016, students **MUST** submit a course completion certificate for the following FEMA course **prior** to the first day of class
 - IS-5.A: An Introduction to Hazardous Materials
 - <http://www.training.fema.gov/is/courseoverview.aspx?code=IS-5.a>

Paramedic Admission

In order to be admitted into the Paramedic program, students must have either their NREMT EMT or Advanced certification or Texas Department of State Health Services EMT-Basic or EMT-Intermediate certification prior to the first day of class and maintain this certification throughout the duration of the Paramedic course. All students **MUST** obtain their State of Texas EMT-Basic or EMT-Intermediate certification in the time specified by the program or their enrollment may be terminated with no refund of tuition or fees. See "Refund Policies" for further information.

FEMA Course Completion Certificates

- For courses starting after October 1, 2016, students **MUST** submit a course completion certificate for the following FEMA courses **prior** to the first day of class:
 - IS-100.B Introduction to Incident Command System
 - www.training.fema.gov/is/courseoverview.aspx?code=IS-100.b
 - ICS 200.B ICS for Single Resources and Initial Action Incidents
 - www.training.fema.gov/is/courseoverview.aspx?code=IS-200.b
 - IS-700.A: National Incident Management System (NIMS) An Introduction
 - www.training.fema.gov/is/courseoverview.aspx?code=IS-700.a
 - ICS 800.B
 - www.training.fema.gov/is/courseoverview.aspx?code=IS-800.b

Students Who May Be Denied Admission or Re-Admission

Occasionally, there are circumstances in which a student may be denied entry or reentry into the program.

The following are examples of when a student may be denied initial entry into the program for the following reasons (not all inclusive):

- Behavioral issues that cause instructors, employees or students to become fearful for their safety
- Bizarre behavior that is not in-line with the expectations of an EMS professional
- Significant language barriers. The ability to speak fluently as well as reading and writing English are required skills and no accommodation can be made.
- Evidence of impairment from drugs or alcohol during their registration appointment
- A criminal offense that would prohibit them from being certified
- Evidence of cheating on an entrance exam or plagiarizing their admission essay
- Outstanding payments due to EMTS Academy
- License or certification suspended or revoked in any state in a related field
- Falsification of documentation

Including the above, the following are examples of when a student may be denied REENTRY into the program for the following reasons (not all inclusive):

- Evidence of impairment from drugs or alcohol during class
- Evidence of attempting to circumvent a program-required drug test
- A criminal offense that would prohibit them from being certified
- Evidence of cheating on an EMTS Academy quiz or exam
- Lying during any investigation, inquiry, call review or similar setting by the program, EMS provider or hospital
- Stealing EMTS Academy equipment

- Injuring a patient, fellow student, employee or instructor during class, clinicals or EMS shift
- Testing positive for illegal drug use
- Behavior that compromises clinical or contractual agreements
- Failure to pass a class within 2 attempts
- Falsification of documentation

Functional Position Description

NREMT Certification	State of Texas Certification
Emergency Medical Responder (EMR)	Emergency Care Attendant (ECA)
EMT	EMT-Basic
Advanced EMT (AEMT)	EMT-Intermediate (EMT-I)
Paramedic	Paramedic

Introduction

The following position description provided by Texas Department of State Health Services describes the qualifications, competencies and tasks required of an EMR (ECA), EMT (EMT-Basic) AEMT (EMT-Intermediate), and/or Paramedic (EMT-Paramedic). For the most up to date information, go to:

<http://www.dshs.state.tx.us/emstraumasystems/JOBDESC.shtm#jobdesc>

Requirements must be met throughout the entire class

The requirements of the Functional Job Description must be met throughout the entire class.

Accidents, illness or injuries that prevent a student from meeting the requirements of the Functional Job Description may result in a student being dismissed from the program. Students should consult with the Program Director should a serious accident, injury or illness occur.

Qualifications

Successfully complete a department-approved course. Verification of skills proficiency and achievement of a passing score on the written certification examination.

Must be at least 18 years of age. Generally, the knowledge and skills required show the need for a high school education or equivalent. Ability to communicate verbally; via telephone and radio equipment; ability to lift, carry, and balance up to 125 pounds (250 with assistance); ability to interpret written, oral and diagnostic form instructions; ability to use good judgment and remain calm in high-stress situations; ability to be unaffected by loud noises and flashing lights; ability to function efficiently throughout an entire work shift without interruption; ability to calculate weight and volume ratios and read small print, both under life threatening time constraints; ability to read English language manuals and road maps; accurately discern street signs and address numbers; ability to interview patient, family members, and bystanders; ability to document, in writing, all relevant information in prescribed format in light of legal ramifications of such; ability to converse in English with coworkers and hospital staff as to status of patient. Good manual dexterity, with ability to perform all tasks related to highest quality patient care.

Ability to bend, stoop, and crawl on uneven terrain; and the ability to withstand varied environmental conditions such as extreme heat, cold, and moisture. Ability to work in low light and confined spaces.

Competency Areas

ECA Emergency Care Attendant (NREMT EMR)

Must demonstrate competency handling emergencies utilizing all Basic Life Support equipment and skills in accordance with all behavioral objectives in the DOT/First Responder Training Course and the FEMA document entitled "Recognizing and Identifying Hazardous Materials", and to include curricula on aids to resuscitation, blood pressure by palpation and auscultation, oral suctioning, spinal immobilization, patient assessment, and adult, child, and infant cardiopulmonary resuscitation. The automated external defibrillator curriculum is optional.

EMT Emergency Medical Technician (NREMT EMT)

Must demonstrate competency handling emergencies utilizing all Basic Life Support equipment and skills in accordance with all behavioral objectives in the DOT/EMT Basic curriculum and the FEMA document entitled "Recognizing and Identifying Hazardous Materials". EMT 1994 curriculum includes objectives pertaining to the use of the pneumatic antishock garment, automated external defibrillator, epinephrine auto-injector and inhaler bronchodilators.

EMT-I Intermediate (NREMT AEMT)

Must demonstrate competency handling emergencies utilizing all Basic and Advanced Life Support equipment and skills in accordance with all behavioral objectives in the DOT/EMT Basic and EMT-I curriculum. The curriculum will include objectives pertaining to endotracheal intubation.

EMT-P Paramedic (NREMT Paramedic)

Must demonstrate competency handling emergencies utilizing all Basic and Advanced Life Support equipment and skills in accordance with all behavioral objectives in the DOT/EMT Basic, EMT-I curriculum, and the EMT-P curriculum. The EMT-P has reached the highest level of pre-hospital certification.

Required Immunizations

Students shall provide written documentation of the following vaccinations or test by a physician prior to the week of clinical rotations. Students that fail to obtain these records will be denied the opportunity to participate in clinical settings.

Immunizations:

- MMR (measles, mumps, rubella)
- DPT (diphtheria, pertussis, tetanus)
- HBV (hepatitis B) A three (3) shot series or serological evidence of immunity by titer testing is required prior to starting clinical rotations/field internships
- Seasonal and H1N1 flu vaccines (A N95 mask must be worn if declined)
- Varicella Zoster (chicken pox) Vaccine or serological evidence of immunity

Testing:

- PPD (tuberculosis skin test) and/or chest X-ray with a positive skin test. Test or X-rays must be performed within 3 months prior to the scheduled course start date.

Students will be financially responsible for immunizations and testing including physician and exam fees.

EMT

- Hepatitis-B, 3 shot series
- DTap within 10 years
- Meningitis within 5 years
- Varicella, 2 injections if the first injection was administered after age 13
- Negative TB test
- Current year flu vaccine, if not completed the student must wear a mask during patient contact during their ER rotations

AEMT:

- Hepatitis-B, 3 shot series
- TDap within 10 years
- Meningitis within 5 years
- Varicella, 2 injections if the first injection was administered after age 13
- Negative TB test
- Current year flu vaccine, if not completed the student must wear a mask during patient contact during their ER rotations.

Paramedic:

- Hepatitis-B, 3 shot series
- TDap within 10 years
- Meningitis within 5 years
- Varicella, 2 injections if the first injection was administered after age 13
- Negative TB test
- Current year flu vaccine, if not completed the student must wear a mask during patient contact during their ER rotations

If the Paramedic student is “exempt” from immunizations, a negative TB test is still required. In addition, the paramedic student will need to obtain pediatric patient contacts through their ER and/or EMS rotations. Lone Star Circle of Care will not allow students without current immunizations into their facility for clinical rotations.

Students who refuse certain immunizations

Students who refuse certain immunizations must have a TDSHS immunization exemption form submitted during registration. Students must have a TB test regardless of exemption status. Those students who choose to be exempt from immunizations are advised that finding employment will be more difficult as most medical employers require immunizations prior to employment.

High School Diploma or Equivalency Policy

A student must be qualified to attend EMTS EMS courses. A student qualifies if she:

- Has a high school diploma from an accredited public or private school; OR
- Has the recognized equivalent of a high school diploma, such as a general educational development or GED certificate; OR
- Is currently enrolled in high school and completes the required EMTS Academy forms documenting their enrollment

A student may self-certify that he has received a high school diploma or high school equivalency certificate. If a student indicates that he has a diploma or high school equivalency certificate, EMTS Academy isn’t required to ask for a copy except when (except as noted below).

It is **NOT** expected that EMTS Academy check the high school data for every student against other information obtained by EMTS Academy during admissions, but if they have reason to believe the high school diploma is dubious—e.g., the program knows the student bought the diploma or transcript and was required to perform little or no work—the student must validate the diploma.

Checking the validity of a high school diploma

If EMTS Academy has reason to believe that the high school diploma is not valid or was not obtained from an entity that provides secondary school education, an Administrator must evaluate the validity of the student's high school completion. A student's self-certification is not sufficient to validate a high school diploma that is in question. Students who indicate on their application that they graduated high school must give the name, city, and state of the high school.

Acceptable documentation for checking the validity of a student's high school completion can include the diploma and a final transcript that shows all the courses the student took.

Recognized equivalents of a high school diploma

EMTS Academy recognizes several equivalents to a high school diploma:

- A GED certificate; or
- A State certificate that the student has passed a State-authorized examination that the State recognizes as the equivalent of a high school diploma; or
- For a student who enrolls before completing high school, proof of enrollment in high school. The student must satisfy EMTS Academy's written policy for admitting such students.
 - High school seniors may apply, but must be 18 years old and hold a high school diploma or GED to become state certified as an EMT in Texas.

Americans with Disabilities (ADA) Compliance

All students in an EMS course must meet the physical requirements of the Function Job Description. If a course involves clinical or EMS time, the Functional Job Description must be signed by a nurse practitioner, physician's assistant or physician.

Services for Students with Disabilities

The Americans with Disabilities Act (ADA) of 1990 has implications that pertain to licensure or certification.

The Functional Job Description

(<http://www.dshs.state.tx.us/emstraumasystems/JOBDESC.shtm>) describes the required skills and job requirements essential for EMS personnel. This description will guide all accommodations permitted for EMS students. The law permits testing that requires the use of sensory, manual or speaking skills that measure the essential functions of the profession.

"Both the ability to read and the ability to perform skills within time frames are essential functions for an EMS provider. Therefore, in EMS, a person with a disability may not be denied the opportunity to take an examination; but this person shall be required to take a written exam and pass the skills proficiency verifications within established criteria.

The following specific points pertain to those involved in EMS training and education programs:

- Students *cannot* be discriminated against on the basis of a disability in the offering of educational programs or services.

- There can be *no* accommodation during screening, evaluation or course examinations that will compromise or fundamentally alter the evaluation of skills that are required to function safely and efficiently in the profession.
- Students who have received an accommodation during the course need to fully understand that there is a separate process for requesting an accommodation for the written certification exam and eligibility for an accommodation is determined on a case-by-case basis. In other words, just because a student was allowed an accommodation during the course does not guarantee an accommodation for the National Registry exam. Documentation confirming and describing the disability should be submitted according to policy for consideration.

Accommodations that are NOT allowed in EMS

There are accommodations that are not allowed in the EMS Program because they are not in compliance with the essential job functions of an EMT or paramedic as outlined in the Functional Job Description. These include, but are not limited to:

Students are not allowed additional time for skills with specific time frames.

Obviously, patients would suffer due to life threatening conditions in emergency situations if treatment were delayed.

Students are not allowed unlimited time to complete a written exam.

This request is not considered reasonable because a candidate should be able to complete a test within a finite amount of time.

Students needing an accommodation will be allowed a maximum of time and one-half to complete written exams.

Students are not allowed to have written exams given by an oral reader.

The ability to read and understand small English print is an essential function of the profession, and written exams are designed, at least in part, to measure that ability.

Students are not provided a written exam with a reading level of less than 8th grade.

The EMS profession requires a reading level of at least 8th grade to work safely and efficiently.

Students must take all exams during the scheduled time, as a member of the enrolled

class.

The ability to utilize knowledge on the spur of the moment is an essential task for EMTs and Paramedics.

Exams are given to elicit immediate recall and understanding of emergency situations. Students will be permitted a private space to take the exam. Refer to the written examination policy of missed exams due to excused absences.

Students must answer all written test questions as written. No explanation of the question can be provided by the test proctor or any other individual.

Additional descriptions of test questions would not be a reasonable accommodation because reading and understanding written English is an essential part of EMS communication. Student must be able to understand and converse in medical terms appropriate to the profession.

Because of the critical nature of the tasks needed in emergency situations, accommodation requests are considered very carefully, on a case-by-case basis. The safety and welfare of the community must be insured while providing full protection of the certification applicant's rights. The main question to be considered is: "With the accommodation being requested, can this individual perform the essential functions of the job safely and efficiently?" (COAEMSP)

Requesting an Accommodation

Students may request an accommodation from the program for certain learning disabilities such as ADD, ADHS, dyslexia or similar disabilities. The student **MUST** request this information during the registration process or by the end of the 2nd day of class. If an accommodation is NOT requested by this date, no accommodation will be granted for the remainder of the course. The only accommodation that may be granted by the program is time and one half for quiz and test questions. Typically, students are allowed 60 seconds for each question on an exam. Students receiving an accommodation will be given 90 seconds for each question.

Applicants with disabilities are entitled to, and have the responsibility to meet, the same deadlines for application and submission of documentation established for preregistration of nondisabled individuals. The process involved in establishing eligibility will not impose discriminatory timelines for application on the individual with a disability.

Students receiving this accommodation are advised that this accommodation does NOT apply to skills with specific time frames as this could endanger the public if emergency medical treatment is delayed.

In addition, students who receive an accommodation from EMTS Academy may or may not receive the same accommodation from the National Registry of EMTs. For more information about an accommodation from the NREMT, the student will need to contact them directly at www.NREMT.org or https://www.nremt.org/nremt/about/policy_accommodations.asp

Computer Literacy

Graduates of EMTS must be able to demonstrate competency in the basic use of computers by using computer technology in solving problems, communicating, and acquiring information. EMTS will conduct course correspondence through the use of email and learning management software (LMS) called Moodle and ensure computer competency through the use of common applications in assignments, student research, and other coursework. EMTS graduates will possess the skills needed to use personal computer systems for employment, individual, and educational applications.

Most courses will have an LMS component through which course communication will occur. Students will be required to access online correspondence on a regular basis as defined by the course instructor.

Students must have their own access to a computer, Internet access and be able to print assignments as a requirement of the class.

Email should be checked twice daily while in an EMTS course. ALS students will be required to use the Internet extensively to schedule and track their skills using FISDAP.

Texas State University Credits, Experiential Learning, Transfer Credits, and Advanced Placement

Texas State University Credit

Graduates of EMTS may receive up to 30 college credits for EMS training from Texas State University toward a Bachelor's Degree of Applied Arts and Science. A student must meet admission requirements for Texas State University in order to qualify. For full details, contact the Texas State University Department of Occupational, Workforce, and Leadership Studies (OWLS) at <http://www.owls.txstate.edu/>

Policy on Credit for Experiential Learning (Life Experience)

EMTS does not give credit for experiential learning.

Policy on Transfer of Credits

EMTS does not accept transfer credits. See the certifications required for admission into Paramedic courses under Advanced Placement.

Policy on Advanced Placement for Other Allied Professionals

EMTS Academy does not currently allow advanced placement for other allied professionals.

Credit for Previous Training for Students Receiving VA Benefit

(Title 38 Code of Federal Regulations 21.4253(d)(3) and 21.4254(c)(4))

Students receiving VA education benefits are required to have all prior credit reviewed by the school, with credit awarded where applicable. This review includes all credits from military service as well as all post-secondary institutions previously attended.

The school is responsible to obtain copies of all post-secondary and military transcripts for all veteran students receiving or requesting to receive VA education benefits. This requirement applied to all approved programs of study offered by the school.

Tuition, fees, and other program costs

EMT Course Costs

<u>Total Payable to EMTS Academy:</u>		
Tuition		<u>\$2,799.00</u>
<u>Payable to others:</u>		<u>\$864.62</u>
Texas State Parking Permit (annual)		\$115.00
Textbook Package		\$243.97
Uniform (varies: GALLS Uniform)		\$210.00
Blood Pressure Cuff and Stethoscope (varies)		\$25.00
Verified Credentials Background Check and Immunization Record Account		\$105.00
Identogo Fingerprint Card		\$21.65
NREMT Exam (taken after course completion)		\$80.00
TDSHS Certification/License Fee		\$64.00

Paramedic Course Costs

<u>Total Payable to EMTS Academy:</u>		
Tuition		<u>\$13,210.00</u>
<u>Payable to others:</u>		<u>\$1,301.35</u>
Texas State Parking Permit (annual)		\$115.00
Textbook package (includes Human Anatomy and Paramedic Text and Online Access)		\$471.71
Cardiology Textbook		\$118.99
Uniform (varies: GALLS Uniform)		\$210.00
Blood Pressure Cuff and Stethoscope (varies)		\$25.00
Verified Credentials Background Check and Immunization Record Account		\$118.00
Identogo Fingerprint Card		\$21.65
NREMT Written Exam		\$125.00
TDSHS Certification/License Fee		\$96.00

REFUND POLICIES

Withdrawing from a Course

A student that voluntarily chooses to withdraw from a course may be entitled to a tuition reimbursement at the following rates minus the fees for books, other supplies, and any other additional expenses shown below. Note: The student must withdraw within the first two (2) weeks of the course. If a student withdraws after the 2-week date, no refund will be issued. Notification must be made in writing to the Program Administrator. See the Payment Plan terms for further details.

Reimbursement:

- If on a payment plan, less the non-refundable payment plan fee shown on the payment plan contract
- Less \$30 per scheduled hour of instruction up to the date of the withdrawal, should the class begin before the withdrawal request is made

Special rules apply to persons using Veteran Administration (VA) benefits. See the “Refund Policy for Veterans” for more information.

Refund Policy for Veterans

The following refund policy will be **ONLY** applied to veterans and eligible persons of a Veteran using the VA Benefits to pay for training at EMTS Academy:

In the event the veteran or other eligible person fails to enter the course, or withdraws, or is discontinued therefrom at any time prior to completion of the approved program length for VA students, the amount charged to the student for tuition, fees, and other charges for the completed portion of the course shall not exceed \$10.00 (only if a registration fee is charged) plus the approximate pro rata portion of the total charges for tuition, fees, and other charges that the length of the completed portion of the course bears to its total length. The completed portion is the total number of days the student was scheduled to attend (from first to last date of attendance) multiplied by the scheduled hours of attendance per day.

Refunds will be totally consummated within the forty (40) days after termination.

Dropping a Student (Involuntary Withdrawals)

A student is considered “dropped” from the program when they fail to meet the cognitive, psychomotor and/or Affective Domain requirements of a course. Students are typically dropped for the following reasons (not all inclusive):

Failing more than the total number of tests allowed as outlined in the course syllabus

Behavioral issues (excessive tardiness, poor attitude or behavior)

Failing the same skill twice

Failure to comply with their payment plan agreement

A student is removed from a course due to policy infractions or poor performance is **NOT** entitled to a tuition reimbursement.

STUDENT PROGRESS

Maintenance of Certification

In order to be admitted into the Paramedic program, students must have either their NREMT EMT or Advanced certification or Texas Department of State Health Services EMT-Basic or EMT-Intermediate certification prior to the first day of class and maintain this certification throughout the duration of the Paramedic course.

A student SHALL have a current State of Texas EMT-Basic or EMT-Intermediate certification from DSHS PRIOR TO beginning and throughout field and clinical rotations in an EMT-Paramedic course.

Students must maintain a current American Heart Association (AHA) Healthcare Provider CPR card during the entire course from an approved AHA training provider.

Lapses in Certification

If a student's certification lapses during the course, the student **WILL NOT BE PERMITTED** to participate in Clinical Rotations which could result in a student being dismissed from the program. If the lapse exceeds 90 days, the student **WILL NOT BE PERMITTED** to participate in any program activity including, but not limited to, lecture and laboratory practice.

Notifying DSHS and EMTS Academy of Arrests/Convictions

Students must notify EMTS Academy and DSHS of an arrest or conviction. For the specific laws regarding notifying DSHS, search for TAC 157.37 or go to:

[http://texreg.sos.state.tx.us/public/readtac\\$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&p_tac=&ti=25&pt=1&ch=157&rl=37](http://texreg.sos.state.tx.us/public/readtac$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&p_tac=&ti=25&pt=1&ch=157&rl=37)

Certified students must also keep a current email address on file with DSHS. Failure to do so can result in disciplinary action by DSHS.

Grievance Policy

EMTS Academy strives to apply policies in a fair, firm and consistent manner. As a general rule, most problems can be resolved through the normal chain of command and communication (Student→ Instructor→Program Administrator→Program Director). The grievance process is not designed to circumvent this normal administrative process or to limit a student from speaking to someone about a harassment complaint.

If students feel that they have been discriminated against based on sex, race, color, national origin, veteran status, handicaps or age, they are to follow the process listed below.

Definition of a grievance?

A grievance is an educational or personal problem or condition that a student believes to be unfair, inequitable, or discriminatory, or a hindrance to his/her education.

What is NOT a grievance?

This grievance procedure is not designed to include changes in policy or educational programs. Recommendations for initiating new policy or changing established policy are handled through normal administrative channels.

Time limit to file

Grievances shall be handled with reasonable promptness, both in submission and processing at each level. Reasonable promptness is defined as a maximum of five class days; however, this time may be extended with the agreement of both parties.

Filing a grievance

Initially, the presentation of a grievance may be made orally. When it reaches the appeal state, it must be made in written form. Students shall be given full opportunity to present their views without fear of coercion or reprisal.

Grievance process

Students who feel they have a grievance should discuss it with the individual(s) involved. The simplest, quickest, and most satisfactory solution will be reached most often at this level.

If the discussion at that level does not resolve the matter to a student's satisfaction, the grievance may be appealed to the next level of supervision, proceeding through the regular line of authority.

At this point, if the matter is still not resolved to the satisfaction of the student, an appeal may be made to the Appeals Committee. The Appeals Committee shall hear only information pertaining to the grievance.

Appeals Committee

When submitting a grievance to the Appeals Committee, the grievance must be stated in writing.

The Appeals Committee shall hear the grievance and make a recommendation. The Appeals Committee shall be ad hoc and shall be composed of the Program Director, Lead Instructor of the course, Clinical Coordinator, three students at any level, and three instructors.

GRADUATION REQUIREMENTS

Criteria for successful completion of each segment of the program

In order to successfully progress through the EMS program, the student must complete all course requirements. A class not completed successfully with an 80% or higher may be taken one additional time only in order to achieve the required score. If a student fails to make the required score during the second attempt, or withdraws from the class, they will be removed from the program.

The only exception would be for a catastrophic event beyond the student's control. The student must petition the Program Director for this exception. The petition will be reviewed by the Program Director who will consider the student's previous academic (didactic, psychomotor and affective) history to make their decision.

Number of credits required for program completion

Graduation from the program does not depend on a required number of credits. Instead, successful graduation from each course requires completion of the requirements listed on the Terminal Competency Form as well as any other program requirements that may be listed in the syllabus.

Criteria for graduation

A student is eligible graduate and to receive a course completion form from each EMS course when they have met ALL of the requirements listed on the Terminal Competency Form as well as any other program requirements that may be listed in the syllabus.

Terminal Competency Forms (TCF)

The graduation requirements are listed on the Terminal Competency Form (TCF). It includes checklists of requirements for attendance, grades, clinical shifts and EMS shifts. At the Paramedic levels, it lists the minimum required number of:

- Patient contacts
- Medication administrations
- Successful IV sticks
- Intubations
- Types of patient encounters (pediatric, adult, geriatric)
- Any other requirements in order to graduate

Required Skill Sign-Offs for Graduation

EMT

Refer to the Terminal Competency Form for your class to view the graduation requirements.

Paramedics

Refer to the Terminal Competency Form for your class to view the graduation requirements.

Last day to complete all requirements in order to graduate

A student **MUST** complete all of the requirements for graduation **PRIOR** to the last scheduled class date. The Program Director may allow an extension of up to 30 days if there are significant extenuating circumstances. An extension will **NOT** be granted for a student's inability to take off work for required clinical/EMS shifts.

Financial Obligations

Tuition payments are strictly enforced. Students on a payment plan contract must make their payment by 5 pm on the scheduled due date. Failure to pay tuition payments by 5 pm on the scheduled payment date will result in late fees being assessed. If the scheduled due date falls on a Saturday or Sunday, the payment must be received no later than 5 pm the following Monday. If the scheduled due date falls on a holiday, the payment must be received by 5 pm on the following business day.

Failure to make a full payment within 7 days of the scheduled due date will result in a student being dismissed from the course with no refund. If a student is dismissed for failure to pay, the outstanding balance of course tuition is still owed to EMTS Academy as outlined in the payment plan contract. Students are advised that failure to pay for their class can result in their account being turned over to a collections agency which can adversely affect their credit score.

Just as most employers prohibit workers from discussing pay with each other, students are prohibited from discussing the details of their payment plans with other students. While all students are charged the same amount for their tuition and fees, the actual monthly payments for each student may differ slightly based on a couple of factors such as:

- The initial payment made by the student. This decreases the remaining balance, which is then divided by the total number of payments.
- Whether or not the student included certain items in their payment plan such as a CPR class or PPE pack.
- A student who discusses their payment plan with another student may be dismissed from the program and puts both students at risk of being dismissed. Students who have questions about their specific financial obligations should discuss them with the Program Administrator. The details of a student's financial payment plan are private and cannot be shared with other students, instructors, or EMTS faculty.

Students will not be approved to take their NREMT exams until all financial obligations to EMTS have been cleared. All student financial obligations to EMTS (including parking tickets from Texas State University received while enrolled at EMTS) **MUST** be resolved by the scheduled course completion date or no course completion certificate will be issued and a student will not

be authorized to take the NREMT exam.

Title 38 United States Code Section 3679(e) School Compliance

The information in this section applies to Covered Individuals under the Veteran's Administration.

As part of the Veterans Benefits and Transition Act of 2018, section 3679(e) of Title 38, United States Code was amended.

A Covered Individual is any individual who is entitled to educational assistance under chapter 31, Vocational Rehabilitation and Employment, or chapter 33, Post-9/11 GI Bill® benefits.

EMTS Academy permits any covered individual to attend or participate in the course of education during the period beginning on the date on which the individual provides to the educational institution a certificate of eligibility for entitlement to educational assistance under chapter 31 or 33 (a "certificate of eligibility" can also include a "Statement of Benefits" obtained from the Department of Veterans Affairs' (VA) website – eBenefits, or a VAF 28-1905 form for chapter 31 authorization purposes) and ending on the earlier of the following dates:

1. The date on which payment from VA is made to the institution.
2. 90 days after the date the institution certified tuition and fees following the receipt of the certificate of eligibility.

EMTS Academy will not impose any penalty, including the assessment of late fees, the denial of access to classes, libraries, or other institutional facilities, or the requirement that a covered individual borrow additional funds, on any covered individual because of the individual's inability to meet his or her financial obligations to the institution due to the delayed disbursement funding from VA under chapter 31 or 33.

EMTS Academy may require the covered individual to take the following additional actions:

1. Submit a certificate of eligibility for entitlement to educational assistance no later than the first day of a course of education.
2. Submit a written request to use such entitlement.
3. Provide additional information necessary to the proper certification of enrollment by the educational institution.
4. Your policy may also require additional payment or impose a fee for the amount that is the difference between the amount of the student's financial obligation and the amount of the VA education benefit disbursement.

CODE OF CONDUCT

Professional Behavior

Students are expected to behave in a professional manner. Students in uniform represent not only themselves but also the EMTS program. Students are expected to assume responsibility for their actions and will be held accountable for them. Therefore, if at any time a student behaves in a manner, which is inappropriate, unprofessional, disrespectful, disruptive, argumentative, or endangers the health or safety of fellow students, instructors, staff, patients, or health care team, they will be referred to the Program Director for possible disciplinary action up to and including immediate termination from the program.

Standards of conduct

(1) Admission to EMTS Academy carries with it the presumption that students will conduct themselves as responsible members of EMTS Academy community. As a condition of enrollment, all students assume responsibility to observe standards of conduct that will contribute to the pursuit of academic goals and to the welfare of EMTS Academy community. That responsibility includes, but is not limited to:

- (a) Practicing high standards of academic and professional honesty and integrity;
- (b) Respecting the rights, privileges, and property of others;
- (c) Refraining from any conduct that would substantially disrupt or materially interfere with school operations;
- (d) Refraining from any conduct that would cause harm to or endanger the health, safety, or welfare of other persons; and
- (e) Complying with the rules, regulations, procedures, policies, standards of conduct, and orders of EMTS Academy and its clinical sites, EMS agencies and other training affiliates.

(2) The disciplinary sanctions specified in this Student Handbook may be imposed on any student found to have committed, to have assisted with the commission of, or to have attempted to commit any act of misconduct that is in violation of the general standards of conduct in subsection (1) of this section, or any of the prohibited conduct specified in this Student Handbook.

Every student is expected to be fully acquainted with all published academy policies, copies of which are available to each student for review on their Moodle course page. The academy will hold each student responsible for compliance with these published policies. A violation occurring off campus while participating in a school-sponsored program may be treated as if the violation occurred on campus. Students also are expected to comply with all federal, state and local laws.

Conduct Required

Students shall conduct themselves in a manner consistent with the academy's mission as an educational institution that certifies Emergency Medical Services professionals. Students who conduct themselves in a manner that violates this Code of Student Conduct may be subject to disciplinary penalties up to and including termination from the program.

Code of Ethics for EMS Practitioners

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

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

Originally written by: Charles B. Gillespie, M.D., and adopted by the National Association of Emergency Medical Technicians, 1978.

Revised and adopted by the National Association of Emergency Medical Technicians, June 14, 2013.

EMT Oath

Be it pledged as an Emergency Medical Technician, I will honor the physical and judicial laws of God and man. I will follow that regimen which, according to my ability and judgment, I consider for the benefit of patients and abstain from whatever is deleterious and mischievous, nor shall I suggest any such counsel. Into whatever homes I enter, I will go into them for the benefit of only the sick and injured, never revealing what I see or hear in the lives of men unless required by law.

I shall also share my medical knowledge with those who may benefit from what I have learned. I will serve unselfishly and continuously in order to help make a better world for all mankind.

While I continue to keep this oath unviolated, may it be granted to me to enjoy life, and the practice of the art, respected by all men, in all times. Should I trespass or violate this oath, may the reverse be my lot.

Written by: Charles B. Gillespie, M.D.

Adopted by the National Association of Emergency Medical Technicians, 1978

Affective Domain Grading

EMS agencies consistently request that students and graduates of programs have the ability to work in the high-stress demanding EMS environment by demonstrating traits such as professionalism, responsibility, accountability and integrity to name a few. These traits fall into the Affective Domain. The Affective Domain (please note: it is spelled correctly) measures the important attributes for an EMS professional. Items measured by the Affective Domain include things like honesty, integrity, responsibility, accountability, compassion, and respect.

Measuring the Affective Domain is required by state and national EMS governing agencies. Employers want to know that a potential employee will meet the rigors of working in EMS. In addition, the public demands that a higher standard of behavior for members of the “public trust.” The public trust includes members of law enforcement, fire departments, military and EMS professionals. The public wants to know that the people who will be providing care to them in a time of need will be respectful, responsible and that they won’t be stealing their money or medications.

Students are evaluated in the Affective Domain based on their class participation and professionalism. This grade is determined by behavior observed by the instructor such as willingness to participate, uniform appearance, overall attitude in class, and application of core values.

Passing is based on appropriate classroom behavior, professional ethics, and adherence to policy. Significant behavioral issues may result in failure of the affective domain. In most cases a written warning and time period for improvement will be given before assigning a failing grade. However, in cases where the behavior is significantly unacceptable, egregious, or poses a threat

to the well-being of others, the posting of a failing grade may be immediate and without warning.

Students will receive 100 points at the start of each class. Points may be deducted for any of the following examples including but not limited to:

- Excessive tardiness
- Negative attitude
- Out of uniform or uniform violations (visible tattoos, body piercings visible, improper T-shirt, etc.). Unwillingness to participate in scenarios as a patient, bystander or provider
- Unwillingness to participate in required group or individual assignments

The course syllabus will determine how many points may be deducted from a student's Affective Domain score. The points listed on the syllabus are guidelines and additional points may be deducted based on the severity of the alleged incident. If a student's Affective Domain score falls below 90 points, the student will be put on course probation. If a student's Affective Domain score falls below 80 points for the class, the student will be dismissed from the program.

A student can be dismissed from the program for behavioral issues even if their Affective Domain score is above 80 points if deemed necessary by the Program Director and/or Medical Director.

Prohibited conduct

Specific examples of conduct which are violations of this Code of Student Conduct include, but are not limited to, committing or attempting to commit the following:

- 1) **Abuse of others.** Abuse of others includes assault and other forms of physical abuse of any person, or any conduct intended to threaten bodily harm or to endanger the health or safety of any person.
- 2) **Abuse of the student conduct process.** Abuse of the student conduct process includes:
 - a) Knowingly making false allegations of misconduct under this conduct code;
 - b) Attempting to coerce a person not to make a report or to participate in proceedings under this conduct code;
 - c) Attempting to influence the impartiality or participation of a member of a school disciplinary committee or the faculty appeal board, any EMTS Academy, or any reviewing officer; or
 - d) Influencing or attempting to influence another person to commit an abuse of the student-conduct process.
- 3) **Academic misconduct.** Academic misconduct includes:
 - a) "Cheating," which includes, but is not limited to:
 - i) The use of unauthorized assistance in taking quizzes, tests, or examinations; or
 - ii) The acquisition, use, or distribution of unpublished materials created by another student without the express permission of the original author(s).
 - b) "Falsification," which is the intentional use or submission of falsified data, records, or other information including, but not limited to, records of internship or practicum experiences or attendance at any required event(s). Falsification also includes falsifying scientific and/or scholarly research.
 - c) (c) "Plagiarism," which is the submission or presentation of someone else's words, composition, research, or expressed ideas, whether published or unpublished, without

attribution. Plagiarism includes, but is not limited to:

- i) The use, by paraphrase or direct quotation, of the published or unpublished work of another person without full and clear acknowledgment; or
 - ii) The unacknowledged use of materials prepared by another person or acquired from an entity engaging in the selling of term papers or other academic materials.
- d) Prohibited collaboration.
 - e) Engaging in behavior specifically prohibited by an instructor in the course of class instruction or in a course syllabus.
 - f) Multiple submissions of the same work in separate courses without the express permission of the instructor(s).
 - g) Taking deliberate action to destroy or damage another's academic work in order to gain an advantage for oneself or another.
 - h) The recording of instructional content without the express permission of the instructor(s), and/or the dissemination or use of such unauthorized records.
- 4) **Acts of dishonesty.** Acts of dishonesty include:
- a) Knowingly furnishing false information to any school official;
 - b) Impersonating, or providing false information in the name of, any school official;
 - c) Forging, altering, or misusing any school document or record, or instrument of identification;
 - d) Falsely claiming an academic credential; and
 - e) Providing dishonest or misleadingly incomplete information or answers on application forms or in response to other official school requests for information.
 - f) Failing to maintain a current mailing address in the EMTS Academy administrative office.
- 5) **Aiding, solicitation, and attempt.** The following conduct is prohibited:
- a) Aiding or abetting another student in the commission of any misconduct prohibited by this conduct code;
 - b) Requesting, hiring, or encouraging another person to commit any act of misconduct prohibited by this conduct code, either intending that the other person commit the misconduct or with the knowledge that the other person intends to commit the misconduct; or
 - c) Attempting to commit any act of misconduct prohibited by this conduct code.
- 6) **Alcohol violations.** The unlawful possession, use, distribution, or manufacture of alcohol is prohibited. A EMTS Academy may elect not to initiate disciplinary action under this subsection against a student who, while in the course of helping another student seek medical assistance, admits to the unlawful possession or use of alcohol. Generally, no disciplinary action under this subsection will be initiated against a complainant or another reporting student, who admits to the possession or use of alcohol (in violation of this subsection) in connection with an incident of sexual misconduct.
- 7) **Computer abuses.** Computer abuses include, but are not limited to:
- a) Unauthorized use of school computer resources;
 - b) Use of another person's school user name and/or password;
 - c) Use of school computing facilities and resources to interfere with the work of another student, an instructor, or other school official;
 - d) Use of school computing facilities or resources to send intimidating, harassing, or threatening messages;
 - e) Use of a computer or software to interfere with normal operations of the school's computing systems;
 - f) Use of the school's computing facilities or resources in violation of any law, including

- copyright laws; and
- g) Any violation of the school's computer use policies.
- 8) **Conduct unbecoming of EMS professional.** Any conduct that is contrary to the interests of the public served by the EMS professional, or which harms the standing of the profession in the eyes of the public. Examples include but are not limited to:
- a) Gambling on academy property.
- b)
- 9) **Discriminatory harassment.** Discriminatory harassment is language or conduct directed at a person because of the person's race, color, creed, religion, national origin, citizenship, sex, age, pregnancy, marital status, sexual orientation, gender identity or expression, disability, or veteran status that is unwelcome and sufficiently severe, persistent, or pervasive such that it could reasonably be expected to create an intimidating, hostile, or offensive environment, or has the purpose or effect of unreasonably interfering with a person's academic or work performance, or the person's ability to participate in or benefit from the school's programs, services, opportunities, or activities.
- 10) **Disruption or obstruction.**
- a) Disruption or obstruction includes intentionally and substantially obstructing or disrupting, through words or conduct, the teaching or learning environment of any school educational setting, or any school functions or activities.
- b) An instructor has the authority to exclude a student from any individual class session or other academic activity in which the student is disorderly or disruptive and such conduct may also be subject of disciplinary proceedings under this conduct code.
- 11) **Domestic violence.** Domestic violence includes:
- a) The infliction of physical harm, bodily injury, assault, or the fear of imminent physical harm, bodily injury or assault committed against a family or household member. Family or household members include:
- i) A current or former spouse or intimate partner;
- ii) A person with whom the person shares a child in common;
- iii) A person with whom one is cohabitating or has cohabitated; or
- iv) A person with whom one resides including a roommate, suitemate, or housemate.
- b) Sexual assault of one family or household member by another family or household member; or
- i) Stalking, as defined in subsection (23) of this section, of one family or household member by another family or household member.
- 12) **Drug violations.**
- (a) The possession, use, distribution, or manufacture of controlled substances on school premises or during school sponsored activities where such possession, use, distribution, or manufacture is illegal under federal, state, or local law is prohibited.
- (b) The possession, use, distribution, or growing of marijuana in all forms is prohibited on school premises or during school sponsored activities.
- (c) EMTS Academy may elect not to initiate disciplinary action under this subsection against a student who, while in the course of helping another student seek medical assistance, admits to the unlawful possession or use of drugs. Generally, no disciplinary action under this subsection will be initiated against a complainant or another reporting student, who admits to the use or possession of drugs (in violation of this subsection) in connection with an incident of sexual misconduct.

13) Failure to comply. Failure to comply includes:

- a) Any failure to comply with the directions of a school official acting in the performance of his or her duties and/or the failure to identify oneself to a school official when requested to do so.
- b) Any failure to comply with the rules, regulations, procedures, policies, standards of conduct, or any order or directive of the school or any of its schools, colleges, and departments.
- c) Any failure to comply with a directive from an academy official, including a summons to the office of an administrative officer at a designated time:
- d) Any failure to comply with any interim measures described below
 - i) After receiving a report of alleged sexual misconduct or other serious misconduct, the school may implement interim measures which may include, but are not limited to:
 - (1) A no-contact order prohibiting direct or indirect contact, by any means, with a complainant, a respondent, a reporting student, other specified persons, and/or a specific student organization; or
 - (2) Changes to class schedules, assignments, or test schedules.
 - ii) Interim measures will remain in place until lifted or modified by the university official who implemented the interim measures.
 - iii) Implementation of any interim measure does not assume any determination of, or create any presumption regarding responsibility for, a violation under this conduct code.

14) Failure to meet financial obligations. Failure to meet financial obligations include but is not limited to:

- a) Issuing a check to the academy without sufficient funds or
- b) Otherwise failing to meet financial obligations to the academy.

15) Harassment or bullying. Harassment or bullying is language or conduct that is unwelcome and sufficiently severe, persistent, or pervasive such that it could reasonably be expected to create an intimidating, hostile, or offensive environment, or has the purpose or effect of unreasonably interfering with a person's academic or work performance, or a person's ability to participate in or benefit from the school's programs, services, opportunities, or activities.

16) Hazing.

- a) Hazing includes any method of initiation into a student organization or living group, or any pastime or amusement engaged in with respect to such an organization or living group, that causes, or is likely to cause, bodily danger or physical harm, or serious mental or emotional harm, to any student or other person. Hazing activities may include, but are not limited to, encouraging or promoting the abuse of alcohol; striking another person whether by use of any object or any part of one's body; causing someone to experience excessive fatigue or physical and/or psychological shock; and causing someone to engage in degrading or humiliating games or activities that create a risk of serious mental, emotional, and/or physical harm. Consent of a victim or victims is not a defense to an allegation of hazing.
- b) Hazing does not include generally accepted practice, training, and conditioning activities, or activities reasonably designed to test a participant's ability to meet eligibility requirements for established athletic events such as intramural or club sports, intercollegiate athletics, or other similar contests or competitions.

17) Indecent exposure. Indecent exposure includes the exposure of a person's genitals or other

private body parts when done in a place or manner in which such exposure is likely to cause affront or alarm, or is against generally accepted standards of decency. Breast-feeding or expressing breast milk is not indecent exposure.

18) Possession or use of firearms, explosives, dangerous chemicals, or other dangerous weapons.

- a) Possessing or using a firearm, ammunition, explosives, weapon (except as permitted by Government Code Section 411.2032) or replica thereof on academy property. Request for exceptions to this prohibition must be submitted in writing to the Texas State University Police Department. The Chief of Police or their designee will review the request and consult any relevant stake holder. The request may be denied, approved, or approved with qualifications. Examples of approved with qualifications may include requirements for the requestor to provide security, safety equipment, special facilities, and/or notifications. A request must comply with all other applicable laws and regulations to be eligible for exception.
- b) Firearms include, but are not limited to, what are commonly known as air guns or rifles, BB guns, and pellet guns, and any instrument used in the propulsion of shot, shell, bullets, or other harmful objects by:
 - i) The action of gunpowder or other explosives;
 - ii) The action of compressed air; or
 - iii) The power of springs or other forms of propulsion.
 - iv) The exhibition or display of a replica or a dangerous weapon prohibited under this subsection is also prohibited if done in a manner, and at a time or place that either manifests an intent to intimidate another or that warrants alarm for the safety of other persons.

19) Relationship violence. Relationship violence, also referred to as "dating violence," is violence committed by a person who is or has been in a social relationship of a romantic or intimate nature with the victim.

- a) The existence of such a relationship shall be determined based on the reporting party's statement and with consideration of the length of the relationship, the type of relationship, and the frequency of interaction between the persons involved in the relationship.
- b) For the purposes of this definition, relationship or dating violence includes, but is not limited to, sexual or physical abuse or the threat of such abuse.
- c) Relationship or dating violence does not include acts covered under the definition of domestic violence.

20) Retaliation. Retaliation includes engaging or attempting to engage in any action, directly or indirectly, including through a third party, that is intended to harass, intimidate, or improperly influence any person who:

- a) Files a complaint, grievance, or allegation of misconduct under any school policy or rule or under any law;
- b) Participates in and/or cooperates with an investigation;
- c) Appears as a witness at a hearing; or
- d) Opposes an unlawful act, discriminatory practice, or policy.

21) Sexual assault.

- a) Sexual assault is sexual contact with another person without, or that exceeds, that person's consent.
- b) For the purposes of this subsection, "sexual contact" includes:
 - i) Any touching of another person for the purposes of sexual gratification; or

- ii) Any penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ, of another person.
- c) For the purposes of this subsection:
 - i) "Consent" means that at the time of and throughout the sexual contact, there are actual words or conduct indicating freely given agreement between the parties to engage in the sexual contact.
 - (1) Past consent does not imply future consent.
 - (2) Consent given to one person does not imply consent given to another person.
 - (3) Consent to one sexual act does not imply consent to other sexual acts.
 - (4) Lack of resistance to sexual contact does not imply consent.
 - (5) Consent can be withdrawn at any time.
 - (6) Consent cannot be given or granted by a person who, at the relevant time, cannot understand the facts, nature, extent, or implications of the sexual contact for any reason including, but not limited to, being asleep, unconscious, mentally or physically impaired due to an intellectual or other disability, or mentally or physically incapacitated due to the effects of drugs or alcohol.
 - (7) Indicators that a person may be incapacitated by drugs or alcohol and therefore, cannot grant consent include, but are not limited to: Stumbling, falling down, an inability to stand or walk on their own, slurred speech or incoherent communication, an inability to focus their eyes or confusion about what is happening around them, passing out, or vomiting.
 - (8) A failure to exhibit any of these behaviors does not necessarily mean that a person is capable of giving consent or is not incapacitated.
 - (9) Sexual contact is not consensual when force or coercion is threatened or used to gain acquiescence.
 - (a) Force includes the use of physical violence, physical force, threats, or intimidation to overcome resistance or gain agreement to sexual contact.
 - (b) Coercion includes using pressure, deception, or manipulation to cause someone to agree to sexual contact against that person's will, without the use of physical force. Pressure can mean verbal or emotional pressure.
 - (10) Sexual assault also includes sexual contact with a person who is under the statutory age of consent.
 - (11) Use of alcohol or drugs is not a valid defense to a violation of this subsection.

22) Sexual exploitation. Sexual exploitation includes:

- a) Taking nonconsensual or abusive advantage of another for one's own sexual benefit, or for the sexual benefit of anyone other than the one being exploited;
- b) Compelling another by threat or force to engage in sexual conduct or activity;
- c) Transmitting, distributing, publishing, or threatening to transmit, distribute, or publish photos, video, or other recordings of a private and sexual nature where such transmission, publication, or distribution is without the consent of the subject(s) and is likely to cause emotional distress to the subject(s);
- d) Taking or making photographs, films, or digital images of the private body parts of another person without that person's consent;
- e) Causing or attempting to cause the impairment of another person to gain nonconsensual sexual advantage over that person;
- f) Prostituting another person;
- g) Knowingly allowing another to surreptitiously watch otherwise consensual sexual

- activity; or
- h) Taking, making, or directly transmitting nonconsensual video or audio recordings of sexual activity.
- 23) **Sexual harassment.** Sexual harassment is language or conduct of a sexual nature that is unwelcome and sufficiently severe, persistent, or pervasive such that it could reasonably be expected to create an intimidating, hostile, or offensive environment, or has the purpose or effect of unreasonably interfering with a person's academic or work performance or a person's ability to participate in or benefit from the school's programs, services, opportunities, or activities.
- 24) **Stalking.**
- a) Stalking means engaging in a course of conduct directed at a specific person that would cause a reasonable person to:
- i) Fear for the person's safety or safety of others; or
- ii) Suffer substantial emotional distress.
- b) For the purposes of this subsection, "course of conduct" means two or more acts including, but not limited to, acts in which the stalker directly, indirectly, or through third parties, by any action, method, device, or means, follows, monitors, observes, surveils, threatens, or communicates to or about a person, or interferes with a person's property.
- c) For the purposes of this subsection, "substantial emotional distress" means significant mental suffering or anguish that may, but does not necessarily, require medical or other professional treatment or counseling.
- 25) **Theft.** Theft is the taking of property or services without express permission of the owner. This includes, but is not limited to, taking, possessing, or aiding another to take school property or services, or property belonging to members of the school community.
- 26) **Unauthorized keys, entry or use.** The unauthorized possession, duplication, or use of keys (including conventional keys, key cards, or alphanumeric passcodes) to any school premises is prohibited, as is the unauthorized entry upon or use of school premises or property. Providing keys to an unauthorized person or providing access to an unauthorized person is also prohibited.
- 27) **Unauthorized recording.** The following conduct is prohibited:
- a) Making audio, video, digital recordings, or photographic images of a person without that person's consent in a location where that person has a reasonable expectation of privacy.
- b) Storing, sharing, publishing, or otherwise distributing such recordings or images by any means.
- 28) **Vandalism.** Vandalism includes maliciously damaging or misusing school property, or the property of any member of the school community.
- 29) **Violation of disciplinary sanctions.** The violation of any term or condition of any final disciplinary order issued under this conduct code, or the failure to complete a disciplinary sanction in the specified time frame, may be grounds for additional disciplinary action.
- 30) **Violation of law.** Any conduct that would constitute a violation of any federal, state, or local criminal law may be the subject of disciplinary proceedings under this conduct code.

Dismissal from the Program

A student will be dismissed from the program if they fail to meet the cognitive, psychomotor, clinical and/or behavioral requirements of a course. A student who is dismissed from the program for any reason is **NOT** entitled to a refund of any tuition, fees or payments made to the program. All payments owed to the program are still due in accordance with the terms of the payment plan agreement.

Special rules may apply to veterans and those using the GI Bill. See “Refund Policy for Veterans” for more information.

In addition to the examples listed under “Prohibited Conduct”, a student may also be dismissed from the program for violation of policies listed in this Student Handbook. The following are examples (not all inclusive) of reasons a student may be dismissed from the program:

- **Admissions**
 - Failure to submit required documents to the program in the time specified
 - Falsifying information requested by the program
 - Failure to maintain certifications required by the program
- **Academic**
 - Failing more exams than allowed by the program
 - Failing to complete required assignments
 - Failure to meet the course grading requirements. Examples include, but are not limited to:
 - Failing to pass the class with an overall grade of at least an 80%
 - Failing to score the minimum required score on exams
 - Exceeding the maximum number of retests allowed by the program
- **Psychomotor**
 - Failure of a retake on a skills test
 - Failing more skills on the initial attempt than allowed by the program
- **Alcohol or Drug Use**
 - Failure to pass a urine drug screen
 - Failure to complete the urine drug screen in the time specified by the program
 - Use of alcohol, illegal drugs or medications that impair judgment while in class, during skills, or while attending a clinical or EMS shift
 - Conviction of a crime related to alcohol or involving drug possession or use subsequent to background clearance.
- **Attendance**
 - Failing to attend at least 90% of all scheduled classes
 - Failing to attend mandatory “card” classes such as CPR, ACLS, PALS, and PHTLS
 - Excessive absences even if they were initially excused
 - Injury or illness that prevents a student from meeting the program requirements listed in the Functional Job Description for the duration of the class
 - Failing to attend clinical or field shifts as required by the program
- **Behavioral**
 - Failure to remediate unacceptable behavior
 - Behavior that compromises clinical, field or contractual agreements

- Inability to relate professionally to faculty, preceptors, peers or patients (disrespect, prejudice in providing treatment, demonstration of an attitude that is detrimental to patient care, etc.)
- Losing more than 20 points in the Affective Domain due to any or all of the following reasons (not all inclusive):
 - An excessive number of late arrivals (tardiness) to class
 - Leaving class early
 - Uniform violations
 - Late paperwork
 - Failure to attend clinical or field shifts as required by the program
- Violations involving the Code of Conduct
- **Financial**
 - Failure to comply with the terms of the payment plan agreement
 - Failure to pay tuition before the required due date
- **Clinical or Field Concerns**
 - Harming a patient
 - Attending a clinical or field shift while under the influence of drugs or alcohol
- **Medical Director**
 - Since the student is working under the Medical Director's license, a lack of support from the Medical Director for the student for ANY reason would result in the student being dismissed from the program.

Applications for readmission from students dismissed for any of the above reasons will be evaluated on an individual basis and are subject to the approval of the Program Director.

Cell Phones, Pagers, and Electronics

Cell Phones

If you carry a cell phone or pager into class or lab, turn it to silent. Checking messages, texting, and use of the phone in any of its capacities is considered cell phone use and therefore not appropriate to class. Having a cell phone out while a test or quiz is present in the classroom is considered cheating and may compromise the integrity of a quiz or test. **Any student caught with a cell phone out during a test or quiz may be subject to disciplinary action up to and including termination from the course for cheating.**

Students may carry a cell phone and or pager when in the clinical environment. Such devices WILL be kept in the silent mode as to not disturb others. The clinical experience will not be interrupted to check and/or respond to pages and calls.

Students are PROHIBITED from taking photos, videos or audio recordings of patients and/or scenes while on clinical and field shifts. Violations of this policy may result in immediate expulsion from the course without warning.

Discrimination, Harassment, Sexual Misconduct, and Denial of Civil Rights

Discrimination against or harassment of individuals on the basis of race, color, national origin, age, sex, religion, disability, veterans' status, sexual orientation, gender identity or gender expression is inconsistent with the purposes of the academy.

Persons at EMTS Academy will not be deprived of their civil rights on the campus or in connection with an academy-sponsored activity. Persons who harass or discriminate against another person are subject to disciplinary sanctions up to and including removal from the academy.

Drug and alcohol policies

Drug screening(s) are required of all EMTS Academy students. As applicable, students who do not pass the drug screening may be unable to complete the course and/or may be denied admission to or suspended or dismissed from the program.

All students are required to comply fully with the drug-testing program created by this policy. If a student tests positive, refuses to be tested, or tampers or attempts to tamper with the testing process, the student will face disciplinary action up to and including termination from the program. Students, who present a valid pre-dated prescription for substance(s) for which they test positive or other satisfactory evidence of a legitimate medical explanation, will be considered on a case-by- case basis.

The unlawful manufacture, distribution, dispensing, possession, or use of an illegal drug is prohibited on EMTS property or as part of any activity sponsored by EMTS.

Drug abuse in the work place is a danger and a detriment to all members of the EMTS community, including faculty, administration, staff and the students. It is therefore the intent of this policy to maintain a drug-free work place.

EMTS cannot and will not protect students or staff from prosecution under federal, state, or local laws.

Students are cautioned that EMTS does not provide sanctuary from the law, nor are students immune from legal investigation or arrest by civil authorities resulting from the possession, use and sale of any dangerous drugs. The sale or transfer of illegal drugs will result in immediate suspension from EMTS and possible prosecution. Further, persons suspected of using illegal drugs or voluntarily being in the presence of their use will be subject to possible disciplinary action by EMTS.

Drug paraphernalia is not allowed anywhere on EMTS property.

If based on observation by an instructor or if an instructor has reasonable suspicion to believe that a student is in possession of an illegal drug on EMTS property, law enforcement will be contacted for assistance dealing with the situation.

While several states have made marijuana use legal, marijuana use is still illegal in Texas and since the student will be functioning in Texas, a positive drug test will result in the student being

dismissed from the program according to policy.

Rationale:

- Health care providers are entrusted with the health, safety, and welfare of patients; have access to confidential and sensitive information; and operate in settings that require the exercise of good judgment and ethical behavior. Thus, an assessment of a student's or accepted applicant's suitability to function in a clinical setting is imperative to promote the highest level of integrity in health care services.
- Clinical facilities are increasingly required by the accreditation agency Joint Commission on Accreditation of Healthcare Organizations (JCAHO), to provide a drug screening for security purposes on individuals who supervise care, render treatment, and provide services within the facility.
- Clinical rotations are an essential element in certain programs' curricula. Students who cannot participate in clinical rotations due to a positive drug screening are unable to fulfill the requirements of a program. Therefore, these issues must be resolved prior to a commitment of resources by EMTS or the student or accepted applicant.
- Additional rationale includes
- Meeting the contractual obligations contained in affiliation agreements between EMTS Academy and the various health care facilities;
- Performing due diligence and competency assessment of all individuals who may have contact with patients and/or research participants;
- Ensuring uniform compliance with JCAHO standards and agency regulations pertaining to human resource management;
- Meeting the public demands of greater diligence in light of the national reports on deaths resulting from medical malpractice and medical errors.

Timing and Procedures of the Drug Screening

Accepted Applicants:

- The respective program designee will provide accepted applicants with the necessary procedures and consent forms for the required drug screening.
- Accepted applicants in designated programs must complete the following prior to the start of classes or clinical assignment:
- Complete and sign the appropriate paperwork and return form to drug screening vendor.
- Successfully pass the drug screen with sufficient time for the vendor to provide clearance documentation to the program designee.
- If an accepted applicant fails to complete the above prior to the first day of classes, he/she will not be allowed to begin classes and will jeopardize admission status in the program.

If a student is absent on the day of a random scheduled drug test, they will have 24 hours to report to the EMTS approved drug-testing vendor. If a student does not complete the drug test within that time, they will be dismissed from the program.

Current Students:

Current students in designated programs will be drug-tested randomly once during class or more frequently if required by the clinical rotation site or by EMTS.

Students who need to complete drug screening will be provided with the necessary procedures and consent forms for the required drug screening by the respective program designee.

Students who fail to adhere to the drug testing deadline set by EMTS will be suspended from all classes until the vendor (see below) provides EMTS with clearance documentation to the program designee.

Identification of Vendors

EMTS will designate an approved vendor(s) to perform the drug screenings. Results from any company or government entity other than those designated by EMTS will not be accepted.

Allocation of the Cost

Students and accepted applicants must pay the cost of the drug screenings.

Period of Validity

Drug screenings will generally be honored by EMTS for a period of one year but may be required on a more frequent basis depending on the requirements of a clinical rotation site. Students who have a break in enrollment may be required to retest before they can re-enroll in any courses. A break in enrollment is defined as non-attendance of one full semester (Fall or Spring) or more.

Drug Screening Panels

The drug screening may include testing for at least the following drug panels plus alcohol:

- Amphetamines
- Barbiturates
- Benzodiazepines
- Cocaine Metabolite
- Opiates
- Phencyclidine (PCP)
- Marijuana (THC) Metabolite
- Methadone
- Methaqualone
- Propoxyphene

Reporting of Findings and Student/Accepted Applicant Access to Drug Screening Report

The vendor will provide the program designee with a list of those students who passed a drug screen test. The vendor will also provide the student/accepted applicant with the results of the drug screening report.

Students with a positive drug screen will have an opportunity to consult with a Medical Review Officer, provided by the vendor, to verify whether there is a valid medical explanation for the screening results. If, after review by the vendor's Medical Review Officer, there is a valid medical explanation for the screening results, the vendor will notify EMTS of a clear test. If, after review by the Medical Review Officer, there is not a valid medical explanation for the positive screen, then the test results will stand.

Any appeal right based on a positive screen rests solely among the student/accepted applicant, the Medical Review Officer, and the vendor.

Suspect Urine

If the vendor returns a urine drug test with questionable results based on pH, relative or specific density, or appearance, that sample will be rejected. Students will be required to submit another urine sample for analysis. If the second drug screen again comes back with questionable results even if the test shows no signs of positive illegal drug use, the student will be dismissed from the program for failure to provide a valid urine drug test. Students who refuse to cooperate or submit to a second drug test will be dismissed from the program.

Positive Drug Screen

An “offense” under this policy is any instance in which a drug screening report shows a positive test for one or more of the drugs listed above in the Drug Screening Panels section.

Accepted Applicants

Accepted applicants with a positive drug screen will not be allowed to begin classes or clinical assignments until the vendor provides clearance documentation to the program designee. EMTS may defer admission to a future semester or require the student to reapply for a future semester if not cleared by the drug-screening vendor. Accepted applicants with a positive drug screen who eventually enroll at EMTS will be considered to have committed their first offense. Students should be aware that failure to pass drug screening, as determined by each facility, will prevent the student from participating in that clinical experience and may delay the student’s completion of the program requirements or prevent the student from completing the program.

Current Students First Offense

Any student with a positive drug screen may be suspended for the remainder of the semester and be administratively withdrawn from all courses and/or suspended for the following semester at the program’s discretion. Random drug screenings paid for by the student may be required by EMTS for the remainder of the student’s enrollment. EMTS may impose additional sanctions and students are encouraged to check with the Program Director for specific details on these possible additional sanctions.

Second Offense

Any student who has a second positive drug screen will be dismissed from the program.

Falsification of Information

Falsification of information will result in immediate removal from the accepted applicant list or dismissal from the program.

Confidentiality of Records

Drug screening reports and all records pertaining to the results are considered confidential with restricted access.

Recordkeeping

Reports and related records (both electronic and paper media) shall be retained in a secure location in the program office for the timeframe listed below, unless otherwise required by law.

Current Students – 5 years

Accepted Applicants – 2 years (provided no pending complaint)

Tobacco/Nicotine Policy

EMTS Academy has adopted the Texas State University policies on the use of tobacco products while on campus. Even though the following does not specifically name e-cigarettes, the intent of the policy is to exclude e-cigarettes. Therefore, e-cigarettes are not allowed. This policy applies to all EMTS Academy classes regardless of the location of the course.

Please note this is a summarized version of the policy. The full policy can be found at www.txstate.edu/effective/upps/upps-04-05-02.html.

A. Policy Statements

1. Texas State is committed to maintaining healthy and safe campuses in San Marcos and Round Rock.
2. The purpose of this policy is to establish policy guidelines prohibiting smoking and the use of all tobacco products at the Texas State campuses in San Marcos and Round Rock. Tobacco products include cigarettes, cigars, pipes, smokeless tobacco and all other tobacco products.
3. The university expects all faculty, students, employees of contractors and subcontractors, and visitors to comply with this policy's spirit and intent.

B. Prohibition of the Use of All Tobacco Products

1. The university prohibits smoking and the use of all tobacco products on all university property including:
 - a. all buildings and vehicles owned, leased, or under the supervision of the university;
 - b. all outdoor grounds including athletic and recreational fields, golf course, parking garages and lots, Sewell Park, University Camp, and Freeman Ranch; and
 - c. all outdoor stadia and grandstands for athletic and recreational fields.
2. Artists or actors who participate in authorized performances which require smoking or the use of another tobacco product as part of artistic productions are exempt from this tobacco policy.
3. Participants in academic research projects involving tobacco products are exempt from this tobacco policy if approved by the institutional review board on human subjects and the Provost and Vice President of Academic Affairs.

C. Reporting Violations of the Tobacco Policy

1. Employees or students who observe tobacco policy violations should inform the person that the university prohibits the use of all tobacco products on university property. If the violator refuses to adhere to this policy, the observer should then report the violation to the appropriate management official which may include persons such as supervisors, program coordinators, directors, vice presidents, professors, department chairs, deans, residence hall directors, apartment managers, or university police.
2. Management officials will take reasonable measures to protect the anonymity of the person reporting the tobacco policy violation, with no retaliation or negative consequences if reported in good faith.

D. Compliance

1. The university expects that all Texas State community members and others who use tobacco products will voluntarily comply with this policy's spirit and intent.
2. The university will deal with tobacco policy violations on a case-by-case basis in accordance with the university's established disciplinary policies. Persons that repeatedly violate the tobacco policy should be reported to the appropriate administrative official:
 - a. Student violations should be reported to the Program Director Office.
 - b. Faculty violations should be reported to the Office of the Provost.
 - c. Staff violations should be reported to the appropriate vice president's office.
 - d. Contractor and subcontractor violations should be reported to the department administering the contract.
 - e. Visitor violations should be reported to University Police.

Computer Resources

Through an agreement with Texas State University, EMTS Academy provides Paramedic students access to the computers located throughout Texas State University. The rules that apply to a Texas State University student regarding the appropriate use of computers shall also apply to students at EMTS Academy who are issued a NetID. Students who violate the policies of Texas State University will have also be considered to have violated EMTS Academy policy and may face disciplinary actions up to termination from the course. Texas State University policies on this topic follow:

Texas State provides each of its authorized users with a computer account, known as a Texas State NetID, which facilitates access to the academy's information resources. In accepting a Texas State NetID or any other access ID, the recipient agrees to abide by applicable Texas State policies and legal statutes, including all federal, state, and local laws. Texas State reserves the right at any time to limit, restrict, or deny access to its information resources and to take disciplinary or legal action against anyone in violation of these policies or statutes.

One such policy is UPPS 04.01.07, Appropriate Use of Information Resources. It clearly outlines the academy's expectations regarding the use of its computing, network, and other information resources and specifies prohibited behaviors. Examples of prohibited behaviors include harassment of other users, intentional virus infusion, bandwidth monopolization, use of academy resources for personal gain, and spam generation. Students should be particularly mindful of recent federal legislation targeting the illegal distribution of music and video files by students using Peer-To-Peer file sharing software. The academy's Notice to Students about P2P and File Sharing describes this new legislation and possible academy sanctions, civil liabilities, and criminal penalties that may result from unauthorized distribution of copyrighted materials.

The academy is also pro-active when addressing information security issues. Please refer to UPPS 04.01.01, Security of Texas State Information Resources, for responsibilities related to security requirements.

Students with questions about the acceptability of various computing related activities are encouraged to contact the Information Technology Assistance Center (ITAC) at 512.245.ITAC (4822).

Inappropriate Uses of Information Resources

- 05.01 The following activities exemplify inappropriate use of the university's information resources. These and similar activities are strictly prohibited for all users:
- a. use of university information resources for illegal activities or purposes. The university may deal with such use appropriately, and may report such use to law enforcement authorities. Examples of illegal activities or purposes include unauthorized access, intentional corruption or misuse of information resources, theft, and child pornography;
 - b. failure to comply with laws, policies, procedures, license agreements, and contracts that pertain to and limit the use of the university's information resources;
 - c. the abuse of information resources including any willful act that: endangers or damages any specific computer software, hardware, program, network, data, or the system as a whole, whether located on campus or elsewhere on the global Internet; creates or allows a computer malfunction or interruption of operation; injects a computer virus or worm into the computer system; sends a message with the intent to disrupt university operations or the operations of outside entities; produces output that occupies or monopolizes information resources for an unreasonable time period to the detriment of other authorized users; consumes an unreasonable amount of communications bandwidth, either on or off campus, to the detriment of other authorized users; or fails to adhere to time limitations that apply at particular computer facilities on campus;
 - d. use of university information resources for personal financial gain or commercial purpose;
 - e. failure to protect a password or Texas State NetID from unauthorized use;
 - f. falsely representing one's identity through the use of another individual's Texas State NetID or permitting the use of a NetID and password by someone other than their owner;
 - g. unauthorized attempts to use or access any electronic file system or data repository;

- h. unauthorized use, access, duplication, disclosure, alteration, damage, or destruction of data contained on any electronic file, program, network, web page, or university hardware or software;
 - i. unauthorized duplication, use or distribution of software and other copyrighted digital materials (including copyrighted music, graphics, etc.). All software and many other digital materials are covered by some form of copyright, trademark, license or agreement with potential civil and criminal liability penalties. The copyright or trademark holder must specifically authorize duplication, use or distribution, or a specific exception of the Copyright Act, such as the Fair Use exception, the Library exception, or exceptions under the TEACH Act, must apply. See also [UPPS No. 01.04.27](#), Intellectual Property: Ownership and Use of Copyrighted Works;
 - j. participating or assisting in the deliberate circumvention of any security measure or administrative access control that pertains to university information resources;
 - k. using university information resources in a manner that violates other university policies, such as racial, ethnic, religious, sexual, or other forms of harassment. See also [UPPS No. 04.04.46](#), Prohibition of Discrimination or Harassment, and The Texas State University System (TSUS) [Sexual Misconduct Policy](#);
 - l. using university information resources for the transmission of spam mail, chain letters, malicious software (e.g., viruses, worms, or spyware), or personal advertisements, solicitations or promotions;
 - m. modifying any wiring or attempting to extend the network beyond the port (i.e., adding hubs, switches or similar devices) in violation of the university's network use policy ([UPPS No. 04.01.05](#), Network Use Policy);
 - n. using Texas State's information resources to affect the result of a local, state, or national election or to achieve any other political purpose (consistent with [Texas Government Code §556.004](#));
 - o. using Texas State's information resources to state, represent, infer, or imply an official university position without appropriate authorization;
 - p. unauthorized network scanning, foot printing, reconnaissance, or eavesdropping on information resources for available ports, file shares, or other vulnerabilities; and
- q. unauthorized alteration or relay of network traffic (e.g., man in the middle attacks).

Grievance Policy

EMTS Academy strives to apply policies in a fair, firm and consistent manner. As a general rule, most problems can be resolved through the normal chain of command and communication (Student→ Instructor→Program Administrator→Program Director).

The grievance process is not designed to circumvent this normal administrative process or to limit a student from speaking to someone about a harassment complaint.

If students feel that they have been discriminated against based on sex, race, color, national origin, veteran status, handicaps or age, they are to follow the process listed below.

Definition of a grievance?

A grievance is an educational or personal problem or condition that a student believes to be unfair, inequitable, or discriminatory, or a hindrance to his/her education.

What is NOT a grievance?

This grievance procedure is not designed to include changes in policy or educational programs. Recommendations for initiating new policy or changing established policy are handled through normal administrative channels.

Time limit to file

Grievances shall be handled with reasonable promptness, both in submission and processing at each level. Reasonable promptness is defined as a maximum of five class days; however, this time may be extended with the agreement of both parties.

Filing a grievance

Initially, the presentation of a grievance may be made orally. When it reaches the appeal state, it must be made in written form. Students shall be given full opportunity to present their views without fear of coercion or reprisal.

Grievance process

Students who feel they have a grievance should discuss it with the individual(s) involved. The simplest, quickest, and most satisfactory solution will be reached most often at this level.

If the discussion at that level does not resolve the matter to a student's satisfaction, the grievance may be appealed to the next level of supervision, proceeding through the regular line of authority.

At this point, if the matter is still not resolved to the satisfaction of the student, an appeal may be made to the Appeals Committee. The Appeals Committee shall hear only information pertaining to the grievance.

Appeals Committee

When submitting a grievance to the Appeals Committee, the grievance must be stated in writing.

The Appeals Committee shall hear the grievance and make a recommendation. The Appeals Committee shall be ad hoc and shall be composed of the Program Director, Lead Instructor of

the course, Clinical Coordinator (or Program Administrator), three students at any level, and three instructors.

SAFETY

General Safety

EMTS maintains a **“Zero Tolerance”** for unsafe behavior.

Students should conduct themselves in a safe manner at all times. Students who violate the safety policy or conduct themselves in a manner that is deemed unsafe may be removed from the classroom, laboratory, field exercises, clinical rotation, or field internship. Students should refrain from horseplay or practical jokes, which could result in injury to them or others.

While performing clinical rotations or field internships students should follow the directions of the preceptor. At any time, the student feels their preceptor has delegated an unsafe task, the student should immediately inform the preceptor that they do not feel that the directed action is safe and that they are unable to perform such actions. Ultimately the safety of the students is their own responsibility.

Vehicle Safety

Students shall wear seatbelts while riding the ambulance. In the event the student should be required to remove the seatbelt to move out of the way or assist in providing medical treatment they should always maintain 3 points of contact. (i.e., both feet on floor with one hand holding overhead railing)

Children in Labs and Classrooms

Due to safety concerns, children are never allowed in the classroom or labs, even in the company of adults. Please arrange for childcare prior to attending class.

Functioning as a STUDENT during Clinicals

Training EMS students is serious business. Part of the responsibility of the program is to ensure that a student is function as a STUDENT and not as an employee or volunteer during their clinical and field training. Texas Health and Safety Code provides a limitation on civil liability for EMS education programs, hospitals, clinics and EMS agencies that train EMS personnel.

Sec. 773.009. LIMITATION ON CIVIL LIABILITY. A person who authorizes, sponsors, supports, finances, or supervises the functions of emergency room personnel and emergency medical services personnel is not liable for civil damages for an act or omission connected with training emergency medical services personnel or with services or treatment given to a patient or potential patient by emergency medical services personnel if the training, services, or treatment is performed in accordance with the standard of ordinary care.

To this end, the following policies must be followed in order to provide protection for the program, its training affiliates and students.

Violations of this policy may result in the immediate removal of the student from further clinical rotations, which would prevent the student from completing their course.

A student who is employed or volunteering for an employer and performs a skill outside their current certification level may be referred to the Texas Department of State Health Services for practicing medicine without a license.

Performing service work while enrolled in the program

The Committee on Accreditation of EMS Professionals states in their Fair Practices Standard (5.C): "All activities required in the program must be educational and students must not be substituted for staff". Therefore, all clinical time and experiences will be conducted within the educational and clinical constraints of the EMSP program. All clinicals and field shifts MUST be scheduled through the Clinical Coordinator.

Time spent as a scheduled paid/volunteer EMS responder or employed in a hospital or clinic CANNOT be counted as clinical or field time.

Safeguarding student health and safety

The Committee on Accreditation of EMS Professionals states in their Fair Practices Standard (5.C):

“The health and safety of patients, students, and faculty associated with the educational activities of the students must be adequately safeguarded. All activities required in the program must be educational and students must not be substituted for staff. For educational activities, individuals must be clearly identified as students, in a specified clinical/field experience/internship, under the auspices of the program medical director, and under the supervision the designated preceptor prior to performing patient care. Students must not be substituted for staff.”

Therefore, all students must be acting in the role as a **student** during all clinical and EMS time. Time spent as a scheduled paid or volunteer EMS responder or employed in a hospital or clinic **CANNOT** be counted as clinical or field time. All students are required to wear the EMTS approved uniform during their clinical and field shifts. All clinical and field shifts MUST be scheduled by the Clinical Coordinator in FSDAP prior to the shift.

Time spent as a scheduled paid/volunteer EMS responder or employed in a hospital or clinic CANNOT be counted as clinical or field time.

Safe Clinical Practices

A safety need can be identified as physical, biological, and /or emotional in nature. Safe practices are an academic requirement of each program.

Unsafe clinical practice shall be deemed to be behavior demonstrated by the student which threatens or violates the physical, biological, or emotional safety of the patients, caregivers, students, faculty, staff or self. Unsafe or unprofessional clinical practice may result in:

- Verbal counseling & written report
- Probation & written report
- Immediate withdrawal from the program.

The following examples serve as guides to these *unsafe behaviors*, but are not to be considered all-inclusive.

Physical Safety Violations Examples (not all inclusive)

- Inappropriate use of side rails, wheelchairs, or other equipment
- Lack of proper protection of the patient which potentates falls, lacerations, burns, and or new or further injury
- Failure to correctly identify patient(s) prior to initiating care
- Failure to perform pre-procedure safety checks of equipment, invasive devices or patient status

Biological Safety Violations Examples (not all inclusive)

- Failure to recognize and correct violations in aseptic technique
- Improper medication administration techniques / choices
- Performing actions without appropriate supervision
- Failure to seek help when needed
- Attending clinical while ill
- Failure to properly identify patient(s) prior to treatments

Emotional Safety Violations Examples (not all inclusive)

- Threatening or making a patient, caregiver, faculty, staff or bystander fearful
- Providing inappropriate or incorrect information
- Performing actions without appropriate supervision
- Failure to seek help when needed
- Unstable emotional behaviors

Unprofessional Practice:

- Verbal or non-verbal language, actions, or voice inflections which compromise rapport and working relations with patients, family members, staff, or physicians, may potentially compromise contractual agreements and/or working relations with clinical affiliates, and or constitute violations of legal/ethical standards
- Behavior which interferes with or disrupts teaching/learning experiences
- Using or being under the influence of any drug or alcohol that may alter judgment and interfere with safe performance in the clinical or classroom setting.
- Breach of confidentiality in any form.

Infection Control

It is the intent of EMTS Academy that each student enrolled in an EMS course meet the objectives necessary for successful completion of that program. Enrollment in an EMT or Paramedic class includes clinical experience, which entails potential exposure to individuals with communicable diseases.

Because student must know how to prevent the spread of infectious diseases for his or her safety and for the safety of others, it is the policy of EMTS Academy that principles of infection control be included in the curricula of each course. It is then the responsibility of students to apply appropriate precautionary measures when providing services to all patients. These measures may include, but are not limited to, hand washing and the use of gloves, masks, protective glasses and gowns as indicated by the circumstances involved in the treatment of a particular patient.

Before beginning clinical rotations, each student must demonstrate a satisfactory understanding of the importance of body substance isolation, personal protection from airborne and blood borne pathogens, and the reporting/notification process for exposure to infectious patients.

Students assigned to affiliated clinical sites must comply with the infection control policy of the entity to which they are assigned. As new information becomes available, instructors will disseminate the finding to all students.

Post Exposure Evaluation and Follow-up:

Procedures for Reporting, Documenting and Evaluating the Exposure

Protocol for Obtaining Medical Treatment, counseling, baseline blood testing and prophylaxis

The protocol for obtaining post-exposure counseling, treatment, baseline blood testing, and (if necessary and agreed) prophylaxis, is listed below.

The person who has been exposed will immediately notify their preceptor of the exposure and remove himself or herself from patient care as soon as reasonably prudent.

At the earliest convenience, the student or preceptor shall contact the Clinical Coordinator via telephone at 512-739-2493.

EMTS employees and students will be initially evaluated at Round Rock Medical Center or at the closest affiliated hospital and will receive follow-up care and counseling, as well as medications. Initial evaluation will be according to the protocol of the affiliated hospital and CDC guidelines for Occupational Exposure of HCP.

An appointment for medical care should be as soon as possible following exposure, and should be no longer than 24 hours after the exposure so that prophylaxis can be provided, if indicated.

Each exposure must also be documented on an EMTS Exposure Report form, appropriate insurance documents and EMTS Incident Report form which are available on the EMTS Moodle website, from the Clinical Coordinator or Program Director.

Serological testing of exposed employees and students

The exposed student or employee's consent is required for collection and testing of blood for HBV and HIV serological status. If consent for baseline serological testing is denied, the exposed employee or student should be requested to provide consent to have blood drawn and stored, usually for a three-month period. This leaves the option open for the person to provide consent for serological testing in the future. If, during this time, the exposed employee elects to have the baseline sample tested, testing shall be done as soon as feasible.

Source patient consent to have blood drawn and analyzed for HIV and HBV

It is usually easier to obtain consent from the source patient for a blood sample to be drawn and analyzed for HIV or HBV if the request is made ***at the time of the incident*** before the patient leaves the medical facility.

The clinical site supervisor where the incident may have occurred is responsible for contacting, obtaining consent and testing the source patient.

If the clinic is not a Round Rock Medical Center facility, it is recommended that the site supervisor still contact, obtain consent and test the source patient otherwise the person supervising the employee or student supervisor must be contacted and alternative arrangements must be made. The site supervisor has the responsibility for ensuring that these provisions are implemented.

Requesting consent from the source patient is mandatory unless it can be established that identification is not feasible or if it is already known that the source patient is positive for HIV and HBV. As soon as infectivity information is determined, this information shall be provided to the treating physician and shall also be forwarded to Round Rock Medical Center Emergency Department.

Custodian of Records

Round Rock Medical Center will be the custodian of EMTS employee and student records pertaining to blood borne pathogen exposure and follow-up.

Medical Follow-up

The facility, which provides counseling, baseline testing, prophylaxis and/or treatment of exposed employees or students, shall forward data and results to Round Rock Medical Center, within 24 hours of seeing the patient. The Medical facility will obtain information about the infectivity of the source patient's blood. Round Rock Medical Center will provide additional treatment and counseling for employees or students, respectively, as necessary. Counseling regarding exposure to blood which has been confirmed to be infective shall be performed in person, whenever possible.

Accident/Incident review

The EMS Program Director will review the circumstances of the exposure incident to determine if procedures, protocols and/or training need to be repeated or revised to prevent a reoccurrence of the incident.

School Cancellation / Inclement Weather

For classes held at EMTS Academy (TXSTRR):

EMTS Academy generally does not allow an excused absence for weather-related absences. If TXSTRR is open during inclement weather, classes are in session and it is expected that students will attend. Students should use their own best judgment as to whether they can safely make it to class. If class is being held, a student who elects not to attend will be counted absent. Again, students must make their own decision as to whether they can safely get to class and EMTS Academy cannot be held responsible for accidents or injuries occurring during inclement weather. A student may miss up to 10% of the class and should only be used for emergent situations.

EMTS will follow the lead of the Texas State University Round Rock with regard to weather cancellations or delays.

Students should check the “News and Announcements” section of Texas State University Round Rock home page at <http://www.rrc.txstate.edu/> for up-to-date information.

Students may also check Texas State University Round Rock or EMTS Academy social media on Facebook, Twitter or similar sites for updates in case of a power failure.

If you see that TXSTRR has cancelled or delayed classes, EMTS Academy will also cancel or delay classes. Please check the local news stations and Internet for updates regarding weather cancellations or postponements.

For classes held off-site at a high school:

For classes held off-site at a high school, EMTS Academy will follow the lead of the individual school district where classes are being held as to whether classes will be cancelled.

Threat Advisory

If you receive word through any legitimate means that the Homeland Security Advisory System is changed to level **RED** or **SEVERE**, do **NOT** report to a clinical or EMS shift.

This policy will be in effect as long as the Threat Advisory remains at **RED** or until notified by EMTS Academy that it is okay to resume clinical and EMS shifts. During this type of event, EMS providers, hospitals and fire departments will be at extremely high level of alert. This policy is important for the safety of our students as well as the security of clinical sites.

Please understand this is a serious time of our nation, and that our local EMS providers, hospitals and fire departments will be on an extremely high level of alert. This policy is important for the security of these clinical sites and for student safety.

ATTENDANCE

Attendance

Full participation and 100% attendance in classes, laboratory periods and examinations are required of **all** students attending EMTS classes. Instructors and preceptors provide the students with valuable life experiences, which are not obtained by reading textbooks or reviewing notes and handouts. The Texas Department of State Health Services requires that each student achieve a minimum number of contact hours. The goal is to provide each student with the maximum number of contact hours possible in order to succeed in the course and as an EMS or fire professional. Because of the *very strict* requirements of the agencies and organizations that regulate our programs, class will **NOT** be allowed to end early. **Students and instructors are required to be present for the entire scheduled class.**

Students that arrive late to a class or leave early will count as time missed. This time will be recorded and will count towards the total time missed during a course. If a student arrives after the scheduled start time as judged by the classroom clock, they will be considered tardy. A student who arrives late for class or leaves class early **MUST** make a note of it in the sign-in book. Failure to accurately document late arrivals or early departures may result in the student being dismissed from the program for falsification of documentation.

An EMS student who misses more than 10% of the class will be dismissed from the program. Even with excused absences, students may not be able to graduate from the program due the serious nature of the training taught by EMTS.

Tardiness is defined as arrival after the scheduled start time of the class, clinical or field internship.

Classroom Attendance

Students shall report to class prior to the scheduled start time so as to not disrupt the students or the instructor.

Recommended Procedures

- Students should arrive a minimum of 5 minutes prior to the scheduled start time
- Students should be in their seats prior to start time
- Students should prepare for lecture or other activities

Clinical Rotation Attendance

Attendance to all clinical rotations is **mandatory**. Students that arrive late may be required to reschedule the rotation. In the event that a student must miss a clinical rotation they must notify the Program Director as soon as possible so that the hospital or EMS provider may be notified. The student will be required to reschedule the clinical.

Hospital Clinicals

Students should arrive at the clinical site and make contact with the preceptor prior to the clinical start time.

Recommended Procedures

Students should arrive 15 minutes prior to the scheduled start time for the clinical rotation. Student should make contact with the clinical preceptor and discuss clinical objectives and identify any needs of special interest. (Restrooms, break room facilities, place to store personal belongings)

EMS Clinicals

Students should arrive at the EMS station and make contact with the preceptor prior to the clinical start time.

Recommended Procedures

Students should arrive 15 minutes prior to the scheduled start time for the clinical rotation. Student should make contact with the clinical preceptor and discuss clinical objectives and identify any needs of special interest. (Restrooms, break room facilities, place to store personal belongings)

Absence from classroom or lab

An excused absence policy has been adopted acknowledging that there may be circumstances under which a student may be absent from class for legitimate reasons. These circumstances and the procedures for approval and notification are listed below.

Students claiming an excused absence must apply in writing and furnish documentary support for their assertion. The **Excused Absence Request Form** and all supporting documentation must be submitted to EMTS Administration. The student is responsible for providing satisfactory evidence to substantiate the reason for absence. In cases where advance notification is not feasible (e.g., accident or emergency) the student must provide notification by the end of the second working day after the absence. This notification must include an explanation of why notice could not be sent prior to the absence from class.

This form MUST be turned in to EMTS administration within 7 days of the student's return to class with the appropriate documentation attached. Forms submitted after 7 days will not be accepted and the student will receive an unexcused absence.

An excused absence does not relieve the student from responsibilities for missed class sessions and examinations and only applies to the mandatory attendance requirement. Students are responsible for contacting each of their instructors regarding the possibility of making-up any missed work. The decision to excuse or not excuse the absence is left to the discretion of EMTS Administration.

An unexcused absence occurring on the day of a quiz will result in a grade of a zero (0) for that quiz.

An unexcused absence occurring on the day of a test will result in the student receiving a zero (0) for that test and will require the student to use one (1) of their retests if there are any remaining. A student who has no remaining test retakes may be dismissed from the program.

Excused Absences

Anticipated Absences

Examples of anticipated situations are:

- Required court attendance as certified by the Clerk of Court and/or participation in legal proceedings or administrative procedures that require a student's presence.
- Absence due to required military duty in the National Guard or active reserve as certified by the student's commanding officer. A copy of the military orders needs to be attached to the **Excused Absence Request Form**.

A student is excused from attending classes or engaging in other required activities, including exams, if he or she is called to active military service of a reasonably brief duration. The maximum time for which an EMS student may be excused has been defined by the Texas Department of State Health Services (DSHS) as no more than 10 percent of the total number of contact hours including the final examination period in which the student is currently enrolled at the beginning of the period of active military service. The student will be allowed a reasonable time after the absence to complete assignments and take exams.

A determination will be made by the Program Director as to whether or not a military absence was voluntary (unexcused) or involuntary (excused absence). Tuition reimbursement will be made according to the Tuition Reimbursement policy. The EMTS Program Administrator must approve excuses before the absence for anticipated absences and the lead instructor of the course must be informed. A student must submit his/her excused absence request to the EMTS Program Administrator at least one week in advance of the scheduled class session(s) on an **Excused Absence Request Form** available online on the Moodle course page.

The form needs to be completed in its entirety and all materials documenting the reason for the absence should be attached to the form.

The EMTS Program Administrator will consider the request for an excused absence and the student will be notified of a decision in a timely fashion usually via email.

Unanticipated Emergency Absences

Excuses for emergency absences must be reported to the EMTS Program Administrator as soon as possible, but no later than the second working day after the absence.

Examples of emergency absences are:

- Injury or illness.
- An absence for a non-acute medical reason does not constitute an excused absence. An injury or illness that is too severe or contagious for the student to attend class will need to be documented. The student is required to obtain medical confirmation from his or her medical provider. The medical confirmation must contain the date and time of the illness and the medical professional's confirmation of needed absence. The mere utilization of medical services does not guarantee that an absence will be considered excused.
- Illness or injury confirmation may be obtained by completion of the **Excused Absence Request Form**, or written confirmation on the provider's official letterhead, of a visit to a health care professional affirming the nature of the illness or emergency, date and time of visit, provider's name, and telephone number.
- Death or serious illnesses in the family when documented appropriately.
- Immediate family may include: mother, father, sister, brother, grandparents, spouse, child, spouse's child, spouse's parents, spouse's grandparents, stepmother, step-father, step-sister, step-brother, step-grandparents, grandchild, step-grandchild, legal guardian, and others as deemed appropriate by EMTS Administration.

In cases of family emergency, students are expected to present evidence or documentation to verify the reason. A completed **Excused Absence Request Form** and funeral notice, newspaper obituary, or similar documentation will be required.

Leave of Absence Policy

EMTS Academy does NOT grant a leave of absence from an EMT or Paramedic class. Students who miss more than 10% of the class will be dropped from the program.

UNIFORMS

Dress Code

EMS students shall wear the following items while in the classroom, laboratory and during their field and clinical internships. All clothing must be completely clean and unwrinkled.

- Dark blue uniform pants
 - Pants should be cleaned and pressed
- EMTS shirt with white T-shirt (no tank tops are allowed)
 - The EMTS shirt needs to be tucked in and have at least one button buttoned
 - Collars must be worn down at all times.
- Black belt
- Black boots (No open toed shoes or high heels)
 - Boots are to be proper laced or zipped
 - Boots shall be shined
- Brassieres
 - Required at all times for female students
- Socks
 - Required, must be black if visible
- Glasses and/or safety glasses
 - No fluorescent-colored eye wear
- EMTS student ID Badge
 - Must be worn at the shoulder or neck level.
 - It cannot be attached to your belt
- EMTS PPE Pack with required personal protective equipment (during internship)
- Hats (beanies) are not permitted at any time other than cold weather and must follow the cold weather policy. Baseball caps are NOT allowed.

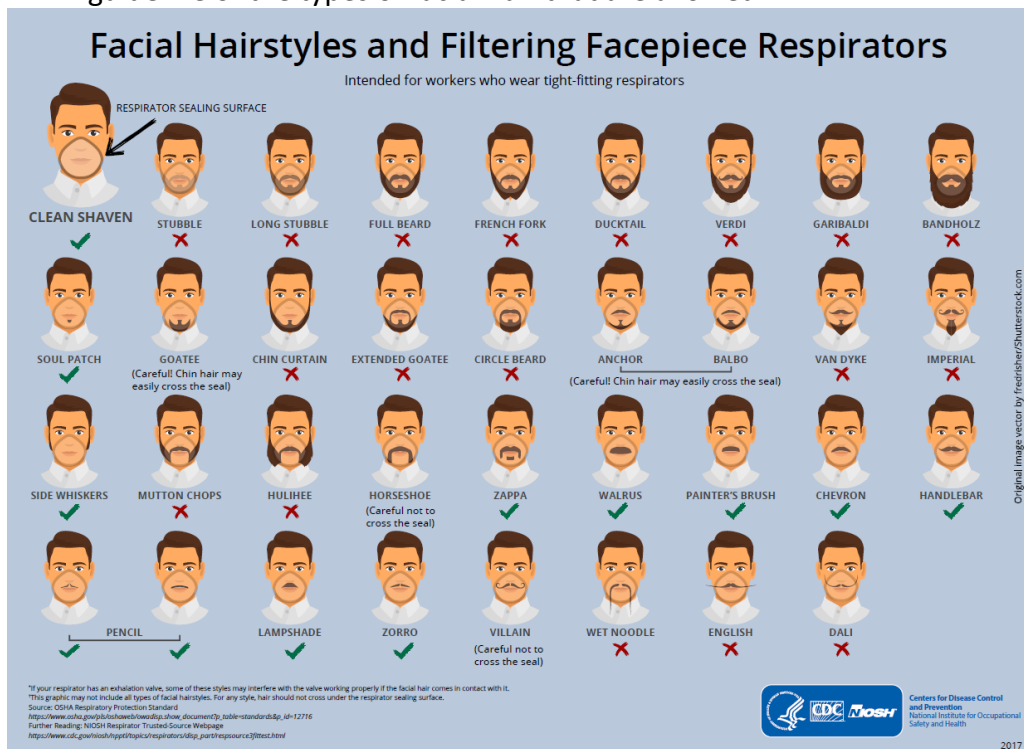
The EMTS uniform is highly recognizable while on campus and in public view. The EMTS uniform is worn with pride and dignity. Therefore, while in the EMTS uniform, it is required that:

- Uniform apparel shall not be worn off duty or casually on the streets.
- Uniforms shall not be worn in any establishment or area known for serving liquor. Personnel are not permitted to be identified in any way with EMTS while in any establishment or area known for serving liquor.
- The uniform policy must be followed at all times while wearing the uniform, including event preparation, breaks, and while enroute to or from the classroom or clinicals.
- Uniforms must only be worn while working at approved EMTS related-events, and directly enroute to and from such events.
- It is strictly prohibited to wear any part of the EMTS uniform in bars, clubs, liquor stores, parties, or any other unprofessional locations, including any location where alcohol or drugs are being used.
- It is strictly prohibited to use any part of the EMTS uniform for any other unprofessional purpose, which will be determined at the discretion of the EMTS Administration.

Grooming and Facial Hair

- A neat, clean, and healthy appearance is essential.

- Students are required to wear hair in a manner that will minimize the possibilities of accidental entrapment or contact with blood or other bodily fluids.
- Hair must be neat and orderly, and pulled back into a ponytail if able to fall into eyes or face. Hair must be of a natural color (no artificial colors such as blue, pink, purple, green or similar shades).
- Students are expected to shave their face daily if they are able to grow facial hair.
- Students may not have facial hair that comes between the sealing surface of an N-95 face piece and the face of the wearer.
 - The CDC “Facial Hairstyles and Filtering Facepiece Respirators” is a general guideline of the types of facial hair that are allowed.



Tattoos

- All visible tattoos or body piercings **MUST** be covered with clothing, make-up or a band-aid (provided by the student). Arm tattoos must be covered with a long sleeve T-shirt or individual cloth sleeve in a solid color in either black, white or tan color.
- “Peeking” of tattoos is also not allowed. Peeking is when a student moves to perform an EMS task and the tattoo becomes visible.

Jewelry

- Students are required to wear a watch that will enable them to assess vital signs.
- Students are encouraged not to wear expensive jewelry while performing duties due to the high probability of damage or loss of such items.
- Students are also limited to the following:
 - One ring per finger (an engagement ring and wedding ring are allowed)
 - One earring per ear (small studs or hoops, no gauges)
 - No visible body piercings are allowed while performing patient care.

Finger Nails

- Students shall not wear red or dark colored fingernail polish, which could disguise blood or other bodily fluid.
- Fingernail polish should be clear or light in color.
- Fingernails shall not be more than ¼" in length to avoid glove failure or injury to the patient.
- It is recommended that artificial nails not be worn during the course, as these will harbor the growth of fungi and bacteria.

Personal Hygiene

- Students are to be clean and odor-neutral.
- Students should NOT report to class, hospital clinicals or EMS rotations with offensive body odors, the smell of cigarette smoke or strong perfumes or colognes.
- No perfume or cologne may be worn while providing patient care as some patients may be sensitive to such items.

Corrective Actions for Uniform Violations

Students that are found to be in violation of this policy are subject to the following corrective actions:

Classroom

Students may be asked to leave the classroom until clothing or hygiene issue is resolved. Students will be considered absent from class during this period. (See *Absentee Policy*)

Hospital Clinical and EMS Rotations

Students that arrive for a hospital clinical or EMS shift that does not comply with the uniform policy will be asked to leave. If a student is asked to leave, an absence will be assessed to the student and they must reschedule the clinical or rotation and may have to pay for another shift if there is a fee charged by the site.

Dining Out While in Uniform

Students in uniform are expected to professionalism and represent the program and EMS at the highest level.

While in uniform, members of the public will be closely watching your behavior and sometimes overhear your conversation.

Be mindful of ALL discussions during meals and how they could be perceived by the general public.

Graphic details of a call may violate HIPAA privacy policies and offend those who overhear the conversation.

While in uniform, students may be offered a discount at some restaurants. If this happens, be polite and accept it. However, students **MAY NOT** ask, demand, inquire about or request a discount even if your peers received a similar discount on the same day or on a previous day. Accept but don't expect a discount. Also, please do not advertise which restaurants offer discounts.

Medical Equipment and PPE pack

Each student must have a personal stethoscope, penlight, watch with a second hand, and safety eyewear for each clinical rotation. For EMS shifts, students are required to have their PPE packs with them.

Cold or Wet Weather

Jackets worn should be navy blue if possible. If a navy-blue uniform jacket is not available, any jacket or coat, which is free of patches, is permitted. A white long sleeve shirt or white turtleneck may be worn under the uniform shirt in cooler weather. Sweaters are not permitted. Hats are not permitted at any time other than conditions of extreme weather and designed for protection from heat loss. Ball caps are not permitted. Raincoats should be plain, without designs or statements. Scotchlite® strips are recommended. Umbrellas are not to be used on clinical rotations.

CLINICAL AND EMS SHIFTS

Skills Required in Order to Start Clinical Shifts

EMT

At the EMT level, all required skill sheets **MUST** be completed before a student will be issued their Fisdap login information.

Paramedic

Each skill sheet **MUST** have the minimum required peer sign offs before a student will be allowed to test with an instructor.

The following skills **MUST** successfully completed and signed off by an instructor **BEFORE** a student can **sign up** for an OR shift in Fisdap:

- Direct Orotracheal Intubation Adult (Instructor)
- Direct Orotracheal Intubation Pediatric (Instructor)

The following skills must be successfully completed and signed off by an instructor **BEFORE** a student can **sign up** for an ER shift in Fisdap:

- IM and SQ Medication Administration (Instructor)
- IO Infusion (Instructor)
- IV Bolus Medication Administration (Instructor)
- IV Piggyback Infusion (Instructor)
- IV Therapy
- Needle Cricothyrotomy (Percutaneous Translaryngeal Ventilation) (Instructor)

FISDAP

Fisdap is a program used to schedule clinical and field rotations. Paramedic students use

FISDAP to track patient encounters and the number of procedures performed by each student.

EMT

EMT students will receive their FISDAP login and password upon successfully passing their final exam and meeting all other clinical requirements.

Paramedic

Paramedic students will receive their FISDAP login and password upon successful completion of the required skills.

Clinical and EMS Shifts

Clinical and field internships are provided in order to help the student relate information learned in the classroom to the clinical or field setting. These clinicals and internships are extremely difficult to schedule due to limited availability and the large number of EMTS students as well as students from other programs.

Successful completion of this section requires the following:

- Student must maintain a grade of 80% or greater
- Successful completion of all required hours, skills, and procedures
- Completion of all clinical and field internship documentation including but not limited to patient care reports, shift reports, and Fisdap reports

Students are expected to arrive on time and in uniform. On time means arriving at the assigned clinical site at least 10 minutes early.

Deadline for Completing Clinical Shifts

The student will receive a start date and end date for each clinical rotation.

Due to constraints of available clinical time, there will be no makeup clinicals scheduled after the end date. If the student is unable to attend a clinical as scheduled, the student will be able to change the date only if it can be arranged with another student or if there is an empty slot available on the clinical calendar. **All clinical changes must be made through the Clinical Coordinator.**

All clinical and field internship shifts **MUST** be completed by the date specified by the program. Any hours not completed prior to the date specified will result in a student being dismissed from the program.

Clinical shift hours and locations

The number of hours required to successfully graduate from the program are determined prior to the start of class by the needs of the program, accreditation requirements, availability of clinical sites, consultation with the Medical Director, state and national rules/laws and guidance from the Advisory Board. The minimum number of hours in each area MUST be completed.

- Paramedic students must complete the required number of hours in the Emergency Department (ED), Operating Room (OR), Intensive Care Unit (ICU), Labor and Delivery (L&D), Cardiac Catheter lab and a pediatric clinic.
- EMT students complete clinical hours in the Emergency Department (ED).

Clinical Competency Minimums

The minimum number of competencies required to successfully graduate from the program are determined prior to the start of class by the needs of the program, requirements for accreditation, availability of clinical sites, consultation with the Medical Director, state and national rules/laws and guidance from the Advisory Board. The minimum number of hours in each area MUST be completed.

- Paramedic students must complete the minimum number of skills such as administering medications, starting IVs and performing advanced airway techniques such as endotracheal intubation.
- EMT students must complete a minimum number of patient contacts.

The total number of clinical and EMS hours as well as the clinical competency minimums are listed on the Terminal Competency Form for each class.

Minimums not met

Additional hours may be required in order to meet program requirements. Students are cautioned about planning start dates for employment based on the last date of class, as they may not have completed all of the requirements at that time.

In the event that a student completes the required minimum number of clinical and EMS hours but still does not have the minimum number of patient contacts, IV sticks, medication administrations or intubations, the following will occur:

- The student will be scheduled for up to 2 additional shifts in the area where they are most likely to get additional patient contacts or procedures. If, at the end of their second shift, the required number of minimums have still not been met:
 - The student will be scheduled to finish the required minimums using simulated scenarios.
 - If a Paramedic student needs additional IV sticks, volunteers will be sought from current EMTS classes. After signing a liability waiver, successful IV sticks on these students may be used to meet the minimum number of required IV sticks.
 - In the event that no volunteers are available, the student may finish the required minimum number of IV sticks using an IV manikin arm or an ALS manikin capable of IV insertion.
- The student will be given a deadline by the program by which the requirements must be met. The extension will typically be no more than 30 days unless approved by the Program Director due to significant extenuating circumstances. Failure of a student to get off work is not a reason for an extension.
- Failure to complete the hours in the time allotted will result in the student being dismissed from the program.

Leaving shift early

A student may leave a shift for the following reason(s):

- Requests to perform illegal or unethical activities
- Harassment or hazing by preceptor or crew
- Directives to disregard or deviate from established policies/protocols
- Requests to falsify or alter written documentation

Missed Clinicals

Once a student has signed up for the shift in FISDAP, they are committed to the shift.

It is expected that students will attend the clinicals for which they are scheduled. **Under no circumstances may the student attend a clinical that has not been properly scheduled.**

If the student is unable to attend a clinical for which they have been scheduled, they must notify the clinical coordinator in a timely manner. If the coordinator is unavailable, then the student is to contact either the Program Director or Program Administrator at 512-255-3687.

The expectation is that notification will be made at least 12 hours in advance of the start of the clinical (whenever possible) but no less than 1 hour prior to the start of the clinical.

The student will be asked to provide documentation for the reason for missing a clinical, including a doctor's note for illness.

Students must NOT show up to a clinical or field internship too sick to attend just because they were unable to afford a doctor's visit. Showing up sick for a clinical or field internship is grounds for disciplinary action up to including termination from the program.

Missed clinicals can only be rescheduled subject to availability of clinical time.

Rescheduling a missed clinical may not be possible due to limited time and or other external staffing constraints.

If, for any reason, a student misses a clinical or is sent home from a clinical, the student may not attend any subsequent clinical until the student has spoken to the Clinical Coordinator. A Doctor's note may be required to return to clinicals from a significant illness or injury.

A missed clinical will count as an unexcused absence if the student fails to provide appropriate notification before the start of the clinical.

If the student is sent home from the clinical by the clinical preceptor for reasons which may include, but are not limited to: dress code violations, failure to bring correct clinical paperwork, arrival more than 10 minutes late for the scheduled start of the clinical, or other reasons as determined by the department, the student will be given an unexcused absence.

A student who has an unexcused clinical absence will be placed on clinical probation, including a 10-point deduction in the Affective Domain grade category.

A second unexcused clinical absence will result in the student being dismissed from the program.

Situations requiring immediate notification of the Clinical Coordinator

The student must immediately contact the Clinical Coordinator if the student becomes ill, is sent home from the clinical, leaves the clinical early, or if anything else unusual or problematic occurs at the clinical site.

Under no circumstances will any student write an official incident report or be interviewed by staff regarding unusual events (for example, questions of patient care, inappropriate behavior, accident reports or procedural issues) occurring during the clinical rotation without the permission and/or representation of the clinical coordinator or another EMTS faculty member.

The student must also notify the clinical coordinator immediately if the student is injured at a clinical site.

Clinical Paperwork

It is the responsibility of the student to see that the documentation forms are completed properly and turned by the prescribed deadline. The clinical supervisor/preceptor (instructor, RN, Paramedic, or other professional) must sign any documentation forms *personally*. Any falsification of clinical documentation will be considered Academic Dishonesty. Paperwork that has not been signed by the appropriate person will not be accepted.

Clinical paperwork must be submitted on the original form. The Clinical Coordinator must approve any variations in advance. All clinical paperwork **MUST** be completed using **ONLY** black or blue ink.

It is the student's responsibility to retain copies of all clinical documentation. EMTS will not be responsible for lost documentation.

EMT Paperwork Submission

Paperwork is due at the time specified by the Clinical Coordinator. Faculty members will not accept clinical paperwork outside the designated time.

Paramedic Paperwork Submission Procedure

The student will turn their paperwork in the attachments of the corresponding Fisdap Clinical or Field shift. Patient data and preceptor signatures must be visible and legible when uploaded. EMTS will **NOT** accept physical copies of clinical paperwork. Students are responsible for timely Fisdap on-line data entry.

The student will be required to keep proof of attendance at clinicals.

The Clinical Coordinator will explain in class how this is to be done. Incomplete originals (missing dates, papers, signatures) will either not be accepted, or may be returned to you as "incomplete" and therefore late if resubmitted past the initial seven (7) days following the

clinical.

Paperwork Deadlines

Clinical paperwork is due in the time specified in the syllabus.

Clinical Data Entry

Clinical data must be entered into Fisdap in the time specified by the program.

Failure to enter the data in the time required will result in the student having to repeat the shift.

EMS Shifts

EMS Station Locations

Google Maps WCEMS Stations <http://bit.ly/1ByxFzW>

Station Addresses can be found on Moodle under Clinical Resources

The ability to locate an address on a map and navigate to it, are essential skills of an EMS provider. Students will be given advance notice of their station assignments and are expected to be on time for ALL assigned shifts. Failure to locate the station and arrive on time could result in the student being sent home and resulting in an unexcused clinical absence.

EMS stations may or may not appear correctly on GPS units in your car or on your phone. Students should spend time in advance verifying they know where to go on the day of their shift. However, students may NOT bother the EMS crews to knock on the door in advance.

For EMS clinicals, students will be given 1-2 weeks of advance notice of the station assignment and station address. Failure to locate the station and arrive on time could result in the student being sent home and resulting in an unexcused clinical absence.

In EMS and fire settings, the crews are given 60 seconds to locate an address on the map and begin their response.

If a student cannot locate an EMS station given days or weeks of advance notice, they may not possess the skills needed to be successful in EMS.

Students must be aware that because of limited EMS availability, they may need to make arrangements with their employer to take time off of work. This is especially relevant during Paramedic classes when certain clinicals and EMS shifts are only available at certain times.

Station Duties

A regular part of an EMS provider's job is performing station duties such as cleaning the station and ambulance. Students are expected to help crews out with station duties. Ideally, the shift duties should be divided among all members of the crew. Occasionally, crew members may decide to have one crew member do the station duties so the other can complete paperwork but this should be done relatively infrequently. The student should not always be assigned to do ALL of the station duties.

The following is a list of station duties that can typically be expected during an EMS shift (not all inclusive):

- Sweeping, mopping and vacuuming floors
- Cleaning bathrooms (yes, that includes toilets)
- Restocking paper towels and toilet paper
- Cleaning dishes used by the crew for meals
- Other weekly duties as assigned by the station captain (usually these are written down ahead of time and posted publicly)
- Waxing the truck
- Cleaning the refrigerator
- Wiping off counters and surfaces
- Washing the truck on a daily basis either at the start or end of the shift
- Cleaning the ambulance
- Decontamination of surfaces
- Conducting an inventory of supplies in the station and on the ambulance
- Resupplying low inventories of supplies
- Cooking meals for the crew on a regular basis. Some crews do this some do not. Students may or may not be asked to participate in this.

If a student feels that the station duties amount to harassment or hazing by the preceptor or crew, they may leave the shift early.

Meals at the station

Because of the wide variety of station locations, facilities, and call volume, you may or may not be able to prepare meals at the station. Other factors include whether or not there is a grocery store or restaurants within the assigned EMS district. For these reasons, students should do the following:

- Do **NOT** expect the crew to take you to get food at a grocery store or restaurant.
- Take a couple of meals with you that can be heated up or prepared at the station.
- Not all stations have cooking facilities. All of them should have a refrigerator and microwave.
- Take money with you in case the crew decides to dine out.
- Have snacks available in case call volume prevents you from eating.

Ride-alongs

Students enrolled in the EMS Program may ride-along with EMS agencies as a citizen of the community. However, students will **NOT** be considered to be conducting a clinical rotation and are not permitted to wear their uniform or represent EMTS in any fashion. ***It is strongly recommended that students wait until their assigned clinical times to ride out with EMS agencies.*** If a student decides to do a ride-along with an EMS agency, the Administration, Clinical Coordinator or Program Director **MUST** be notified in advance.

Students may **NOT** perform **any** medical care such as patient assessments, procedures, or skills during a ride-out not scheduled by EMTS. Students performing any medical care during this type of ride out are **NOT** covered by a medical director and may be guilty of providing medical care without a physician's authorization. Students riding as private citizens do so at their own risk and have no insurance coverage from EMTS and assume all liability for any and all actions during a civilian ride-out.

Violations of this policy may result in the immediate removal of the student from further clinical rotations, which would prevent the student from completing their course.

Conflict Resolution

EMTS Academy recognizes that students will, from time to time, encounter disheartening, unpleasant and occasionally hostile situations. These situations may stem from interaction between individual or groups of other students, faculty, clinical preceptors or clinical sites, the general public, or the witnessing of emotionally traumatic events. While the EMS Program cannot protect students from the dangers and harsh realities of the world, which are encountered on clinical rotations, we will make every effort to give the student the knowledge and skills necessary to protect themselves. To a great extent the student must take the responsibility to use these tools at the appropriate time. This includes situations in which the language, attitude, and behavior of other students, clinical personnel and program faculty may innocently or maliciously be offensive or derogatory based on race, religion, gender, ethnic background, national origin, age, veteran status, or disability. The first step in any of these cases is to notify the involved party of the offense.

Should the offensive behavior continue, the student should notify the next person up the Chain of Command, as delineated below.

In the best interest of all parties involved, students enrolled in the EMS Program must abide by the following procedures.

Conflicts Occurring in the Classroom

Student conflicts are expected to be handled between the parties involved. In the event that the situation cannot be resolved peaceably between the individual or group of students, the course instructor or Program Director should be notified. The situation will be corrected following Program policies, grading criteria, instructional intent and course objectives.

The following chain of command should be followed for problems encountered with the instruction and skills practice in the EMS Program:

- Parties involved
- Instructor / Faculty / Staff present at time of incident
- Lead Instructor
- Program Administrator
- Program Director

Conflicts During Clinical Rotations

Any situation occurring on clinical rotations are to be reported, immediately, to the student's immediate supervisor at the clinical site (usually the assigned preceptor) and progress up the chain of command for that clinical site. In the event the situation involves the immediate supervisor, an attempt at problem resolution should be made without moving further up the chain of command. In the event the immediate supervisor cannot resolve the situation, the next person in the chain of responsibility should be contacted. Problems regarding differing protocols, treatment modalities, or patient care philosophies should be addressed and resolved with an openness for these differences taking into consideration the wide variety of "correct" treatment. In the event the problem cannot be resolved at the clinical site, the student should report the situation to their course instructor or Program Director at their earliest opportunity. Reporting the problem directly to Program Faculty without consulting the clinical personnel is not permitted without extenuating circumstances. The definition of extenuating circumstances will be determined by the Program Director.

Students should understand that the EMS Program is concerned with conflicts encountered while on clinical rotations. However, students should also understand that the clinical site has a vested interest in resolving the problem internally. It will be the prerogative and responsibility of the clinical site to report problems and resolution decisions to the EMS Program.

The following chain of command should be followed for problems encountered during clinical rotations:

- Parties involved
- Assigned Preceptor
- Duty Supervisor / Station Officer / Charge Nurse
- Lead Instructor
- Program Administrator
- Program Director

Criteria for Paramedic Student Field Internship Extension

An extension of the Paramedic student internship phase of training may be granted only after a formal conference and with the concurrence of the preceptors and the faculty member assigned to the student. Identification of specific areas of strength and weaknesses as well as a written plan for improvement will be developed and discussed with the intern. An extension is only considered when a student has shown consistent improvement (documented on daily forms) from shift to shift, but has not quite reached the minimum level of competency required to become certified as a paramedic.

Extension of the internship may include (but not be limited to) the following reasons:

1. Inadequate number of ALS patient contacts
2. Inability to perform adequate organized assessments
3. Inability to determine appropriate plan of care based on chief complaint
4. Inability to demonstrate adequate communication techniques
5. Inability to demonstrate assertiveness in field situations
6. Inability to relate professionally to faculty, preceptors, peers or patients.
- 7.

Internship extensions will be completed in increments of five shifts and shall not exceed a maximum of ten shifts. Daily evaluations and a major evaluation must be completed during each five-shift increment. A student who is unable to attain a "Successful/Competent" (2) rating at the completion of a ten-shift extension will have failed the field internship. After a second failed attempt at completing the field internship, the student will be required to repeat the entire internship.

PATIENT CONFIDENTIALITY

Patient Confidentiality (HIPAA)

Strict confidentiality shall be maintained regarding patient care and clinical activities. This confidentiality shall be maintained **throughout** time as is expected by all medical professionals. Students shall not discuss their observations or the patient's condition with **anyone** other than the preceptor(s) and/or the Program Director. Students shall not discuss the patient's condition or prognosis, except as guided by Program Director.

In the event that any student witnesses questionable behavior, directed at the student, patients, or others, the student should discuss this situation with the Program Director. The student must document, in detail, the event or events. Any other discussion of questionable activities or behavior of other medical care professionals or students will be viewed as breach of confidentiality.

A violation of patient confidentiality or other violation of the Healthcare Information Portability Accountability Act (HIPAA) could lead to the removal from the course, civil liability, or criminal charges by State or Federal Authorities.

Introduction

As a student in a clinical training program of EMTS Academy, you are required to learn about the health information privacy requirements of a federal law called HIPAA (Health Insurance Portability and Accountability Act). The health information privacy requirements are known as the HIPAA Privacy Rule and go into effect beginning April 14, 2003. When you are at a health care facility for clinical training, you are covered by the Privacy Rule as a member of that facility's workforce. In addition to this training, your training site may require you to complete Privacy Rule training specific to that site. When you are at a training site, you must follow that site's policies and procedures, including those concerning health information privacy.

The HIPAA Privacy Rule

The Privacy Rule defines how health care providers, staff, trainees and students in clinical training programs can use, disclose, and maintain identifiable patient information, called "Protected Health Information" ("PHI"). PHI includes written, spoken, and electronic information and images.

PHI is health information or health care payment information that identifies or can be used to identify an individual patient. The Privacy Rule very broadly defines identifiers to include not only patient name, address, and social security number, but also, for example, fax numbers, email addresses, vehicle identifiers, URLs, photographs, and voices or images on tape or electronic media. When in doubt, you should assume that any individual health information is protected under the Privacy Rule.

All patients you come into contact with at a training site will have received a Notice of Privacy Practices, which describes in detail permitted uses and disclosures of PHI and patient rights (discussed below) under the Privacy Rule.

Important Definitions

USE: the sharing, application, utilization, examination, or analysis of PHI by employees and trainees within the training site.

DISCLOSURE: discussing PHI with or providing copies of PHI to persons who are not employees or trainees of the training site.

Disclosure of PHI Outside the Training Site Requires Written Patient Authorization or De-Identification

You may use PHI, without patient authorization, at the training site for purposes of treatment and your training at that site. However, you may not further disclose PHI in any form to anyone outside of the training site, without first obtaining written patient authorization or de-identifying the PHI. This means that you may not, for example, discuss or present PHI from a training facility with or to anyone, including classmates or faculty, who was not directly involved in your training at that facility, unless you first obtain written authorization from the patient. Therefore, it is strongly recommended that whenever possible, you de-identify PHI, as described below, before presenting any patient information outside of the training facility. If you are unable to de-identify such information, you must discuss your need for identifiable information with the faculty member supervising your training and the HIPAA Privacy Officer at your training site, to determine the appropriate procedures for obtaining patient authorization for your disclosure of PHI.

In order for PHI to be considered de-identified under the Privacy Rule, all of the following identifiers of the patient or of relatives, employers, or household members of the patient, must be removed:

- Name
- Geographic subdivisions smaller than a state (i.e., county, town, or city, street address, and zip code) (note: in some cases, the initial three digits of a zip code may be used)
- All elements of dates (except year) for dates directly related to an individual (including birth date, admission date, discharge date, date of death, all ages over 89 and dates indicative of age over 89) (note: ages and elements may be aggregated into a single category of age 90 or older)
- Phone numbers
- Fax numbers
- E-mail addresses
- Social security number
- Medical record number
- Health plan beneficiary number
- Account number
- Certificate/license number
- Vehicle identifiers and serial numbers
- Device identifiers and serial numbers
- URLs
- Internet protocol addresses
- Biometric identifiers (e.g., fingerprints)
- Full face photographic and any comparable images
- Any other unique identifying number, characteristic, or code
- Any other information that could be used alone or in combination with other information to identify the individual.

Safeguarding PHI

The Privacy Rule requires you to "safeguard" PHI at your training site. Use the following practices to ensure Privacy Rule compliance:

- If you see a medical record in public view where patients or others can see it, cover the file, turn it over, or find another way to protect it.
- When you talk about patients as part of your training, try to prevent others from overhearing the conversation. Whenever possible, hold conversations about patients in private areas. Do not discuss patients while you are in elevators or other public areas.
- When medical records are not in use, store them in offices, shelves or filing cabinets.
- Remove patient documents from faxes and copiers as soon as you can.
- When you throw away documents containing PHI, follow the facility procedures for disposal of documents with PHI.
- Never remove the patient's official medical record from the training site.
- Avoid removing copies of PHI from the training site; if you must remove copies of PHI from the training site, e.g., to complete homework, take appropriate steps to safeguard the PHI outside of the training site and properly dispose of the PHI when you are done with it. You should not leave PHI out where your family members or others may see it. All copies of PHI should be shredded when they are no longer needed for your training purposes.
- The U.S. Department of Health and Human Services has issued another set of HIPAA rules (the Security Rules) regarding safety and security of electronic data files and computer equipment. In the next few months, you will be hearing more about electronic safeguards and how the HIPAA Security Rules may affect you at clinical training sites.

Social Media and HIPAA

Social media is a valuable tool when used wisely. However, it can pose significant risks to you—including removal from school program and/or employment-- if used inappropriately.

- Confidential information should not be transferred to or from, or stored within, **any form** of personal technology (e.g., personal computers, cell phones, etc.)
- It should **never** be shared in any form of social media outlet such as Facebook, YouTube, Twitter, etc.
- Students are PROHIBITED from taking photos, videos or audio recordings of patients and/or scenes while on clinical and field shifts.
- Please be aware of and adhere to cell phone usage policies at healthcare facilities.
- Never share patient information or pictures using any form of communication; texting, cell phones, Facebook, twitter, etc.
- Non-compliance can result in immediate dismissal from the agency and/or program.

Never share patient information or pictures using any form of communication; texting, cell phones, Facebook, twitter, etc.

Non-compliance can result in immediate dismissal from the agency and/or program.

Use Only the Minimum Necessary Information

When you use PHI, you must follow the Privacy Rule's minimum necessary requirement by asking yourself the following question: "Am I using or accessing more PHI than I need to?" If you are unsure of the PHI, you may use or access while providing health care for a patient at your training site, please contact your preceptor, supervisor or the HIPAA Privacy Officer at your training site.

Discussing PHI With a Patient's Family Members

Before you may discuss a patient's condition, treatment or other PHI with his or her family member, it must be determined if the patient would object to such a disclosure. You should confirm with your supervisor that the patient has agreed to allow or in some other way has expressed no objection to such disclosures before you may discuss a patient's condition, treatment, or other PHI with his/her family members.

Patients' Rights Under the Privacy Rule

Each training site covered by the HIPAA Privacy Rule will have policies and procedures for implementing the following patient rights under the Privacy Rule:

The right to request alternative communications. Under the Privacy Rule, patients can ask to be contacted in a certain way. For example, a patient may ask a nurse if she/he can leave a message on the patient's home voicemail instead of contacting the patient at work. If a patient's request is reasonable, as is the previous example, the health care provider or facility must follow it.

The right to look at (and obtain copies of) records. Patients can ask to read their medical and billing records, and have copies made.

The right to ask for changes to medical and billing records. Each facility must review and consider all requests for changes to medical and billing records.

The right to receive a list of certain disclosures. Your training site must make and keep a list of certain disclosures of PHI (excluding disclosures for treatment, payment, and health care operations) that are made without patient authorization. Patients have the right to see and receive a copy of this list.

The right to request restrictions on how PHI is used and disclosed. Patients can ask health care providers and facilities to limit the ways they make use of and disclose the patient's PHI for treatment, payment, and health care operations. Providers and facilities are not required to agree to such requests. You, as a trainee, must never agree to such restrictions on behalf of the training site.

The right to receive a "Notice of Privacy Practices". Each health care facility that provides direct patient care must give every patient/client a copy of their Notice of Privacy Practices. The notice describes their privacy practices and the Privacy Rule. The facility must make reasonable efforts to have each patient sign a form acknowledging he or she received the notice. We recommend that you obtain a copy of the Notice of Privacy Practices from your training site and become familiar with it.

The HIPAA Privacy Officer

Each facility at which you train, that is covered by the Privacy Rule, will have a HIPAA Privacy Officer. If you have questions about the implementation of the Privacy Rule at a training site, you should contact the site's Privacy Officer.

If you have general questions regarding the Privacy Rule, you should contact the Privacy Coordinator for EMTS Academy:

Matt Nealand
HIPAA Privacy Officer
EMTS Academy
512-255-3687
mnealand@emtsacademy.com

COURSE CURRICULUM

Course Sequence

Each course is designed to meet the state and national requirements for EMS certification. Because of the variation of the order of chapters by each author or publisher, the chapters may be taught in a different sequence than the textbook.

The sequence of the course is designed to start with a lecture about the topic. Then, the student will see a demo of skills related to that topic. The student will then complete the minimum peer-evaluated skills before being allowed to test with an instructor.

- For EMT, 3 passing peer evaluations must be completed prior to instructor testing.
- For Paramedic, minimums are dependent on current COAEMSP recommendations – please refer to the Terminal Competency Form.

Once a skill is signed off, the student will begin practicing the skill in a scenario led by an instructor. Once a student has completed all of the required skills, they will begin doing clinical shifts to practice the skill on live patients in a hospital setting under the supervision of nursing staff. The student will then complete EMS ride time to see the skills performed in a pre-hospital setting under the supervision of an EMS team member.

Grading

Student grades are based upon performance in the areas of cognitive, psychomotor, and affective domain, as required by the Texas Department of State Health Services. Cognitive grading consists of multiple-choice homework, quizzes and exams; Psychomotor grading consists of passing all required skills testing; Affective domain grading includes class participation and behavior, and clinical and field rotation paperwork when applicable.

Written Assignments and Exams

The course schedule is published the first day of the course so that personal schedules can be prepared accordingly. In the event that the date of a quiz, test, or assignment needs to be changed, this information will be posted on the class's Moodle website, and a new schedule will be posted. It is the student's responsibility to be aware of upcoming assignments, quizzes and tests. The program will provide notice of schedule updates via Moodle and/or email communication, but it is the student's responsibility to check for new messages and stay informed of any updates.

Late Arrivals to a Quiz or Exam

Excused Tardiness

If the absence/tardiness is for an **excuseable** reason and the student arrives after a quiz/exam has begun (i.e., the instructor has already posted the start and end times on the board), the student must wait until the quiz/exam has been completed before joining their classmates.

Examples of late arrivals on a quiz/exam day that would be considered excused if appropriate documentation is provided to EMTS Academy administration:

- Vehicle breakdown (flat tire, car won't start, MVC)
- Family emergency
- Traffic delays beyond normal (example: fatality collision shuts down the interstate)
- Other extenuating circumstances approved by EMTS Academy administration

Documentation of the reason must be provided such as receipts, photos or other evidence of the need to arrive late for an exam. Students should submit the Absence Request Form to EMTS Academy for approval of an excused absence.

If the absence is approved by EMTS Academy administration, the quiz/exam may be made up in a proctored setting designated by EMTS Administration within 8 calendar days of the original scheduled quiz/exam. If there is a cost for to take this quiz or exam, EMTS Academy will pay for it.

Unexcused Tardiness or Absence

If the absence/tardiness is for an **unexcused** reason:

- The student may quietly enter the classroom WITHOUT disturbing their classmates and attempt the quiz/exam.
- The student must complete the exam by the end time listed on the board.
- **NO ADDITIONAL TIME will be granted for late arrivals.**

Examples of Unexcused Tardiness (not all inclusive)

- Oversleeping
- Typical traffic delays
- No clean uniform

If a student chooses not to attempt the quiz/exam or completely misses taking the quiz/exam at the scheduled time, the student will receive a zero (0) for that quiz/exam. If it was an exam that was missed, it will count as an exam failure.

An unexcused absence or tardiness for an exam will require the student to schedule the exam in a proctored setting designated by EMTS Administration and paid for at the student's own expense.

An incomplete or partial attempt on a quiz cannot be retaken.

Cognitive Domain Grading

Didactic Exams

Students must pass all didactic (written) exams with a minimum grade of 75% or higher, with an 80% or higher on the Final Exam for EMT, and a 73% or higher on the Final Exam for Paramedic.

All quizzes containing chapters covered on a module exam must be taken prior to attempting the exam.

All module exams must be passed prior to taking the Final Exam.

All EMT course final exams require a minimum passing grade of 80%. All Paramedic course final exams require a minimum passing grade of 73%.

A student must score an 80% or higher for their final overall course grade, and complete all of the other required coursework in order to receive a course completion certificate.

A student who scores less than a 75% on an exam will be given written documentation notifying them of the failure. Students are encouraged to set up a meeting with their instructor to help determine ways in which the student can increase their scores in class. An “Improvement Contract” or “Learning Contract” may be established to help encourage students to improve subsequent test scores. A student may also be placed on academic probation if they are not above an 80% average at the mid-term. Probationary students will be encouraged to do additional work including additional reading, workbook exercises, outside research, and other assignments designated by the Course Coordinator, Program Director or instructor.

In a given EMT course, a student may be given a total of **two** (2) retests to use on didactic (written) exams. Upon the third exam failure, the student’s enrollment in the course will be terminated. A student may retake the final exam only one time so long as they have not already used their retests. In a given Paramedic course, a student may be given 5 retests to use on didactic (Fisdap) exams, in addition to one (1) retest attempt reserved for the final exam. Upon the 6th failure of any module exam, or the 2nd failure of a final exam, the student’s enrollment in the course will be terminated.

The maximum score on a retest for an EMT module exam will be 79%, even if the score achieved on the retest exceeds this score. The maximum score on a retest for an EMT final exam will be 80%, even if the score achieved on the retest exceeds this score. Retests for Paramedic module and final exams will reflect the score achieved, unless the retest score is lower than the initial attempt, in which case the higher of the two scores will stand until a successful retake is completed.

A student who receives a passing score on an exam may not use a retest in order to get a higher score.

Examinations (quizzes and tests) will be timed. Students will be given one (1) minute per question for multiple-choice questions.

Types of Exam Questions

Exams may consist of a written essay, multiple choice, matching, true/false, fill-in-the-blank, short answer, labeling, and/or identification questions. Exams may be presented in a video, oral, written, and skills performance format.

Determination of Student Grades (EMT-Basic and Paramedic)

Each exam in an EMT-Basic or EMT-Paramedic course will be counted as one exam score. In addition, there will be a final exam grade, which also counts as a single exam score. Quizzes and homework assignments will also be added to the final grade. The total number of points available may vary for each class, please refer to your class syllabus for your applicable grading matrix. The instructor will discuss the assignments for each class and has the ability to add additional homework if necessary to ensure student competency.

Any extra credit assigned and completed during class will be added to the sum of the total points earned prior to calculating the average test score.

Homework assignments may be given throughout the course to ensure student understanding of a topic. Homework assignments may have a different format and weighting depending on the class. The grading matrix for each class will provide the specific details.

The total of all points earned by a student will be totaled and divided by the total number of points possible to determine the final percentage. This score will be rounded to the nearest whole number. A score with a 5 in the tenths place (XX.5) will be rounded up. Example: A student receives a final percentage of 79.5%. This student's grade would be rounded to 80%. A student who receives a 79.4% would receive a 79% for the class and would not meet the minimum required score of 80% required for course completion.

For specific information about the number of points possible for each course, refer to your syllabus.

In order to pass an EMT course, the student's overall course average, exam average, and affective domain must all be greater or equal to 80%, with an 80% or higher on the final exam. In order to pass a Paramedic course, the student's overall course average and affective domain must be equal or greater to 80%, with a 73% or higher on the final exam.

Paramedic Card Classes

Paramedic students will be required to complete several card classes such as Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), Pre-Hospital Trauma Life Support (PHTLS) as well as others as part of their training. Successful completion of the course is a requirement for graduation from the program. If a student does not pass the course offered with their class, they will have one (1) attempt to retake a class at the student's expense in a time frame established by the Program Director.

Examinations

When a student is taking an examination, the following rules and policies apply:

- Except for a pencil, the exam, Scantron form and a piece of scratch paper for drug calculation problems for Paramedic students ALL other books, purses, backpacks, cups, drinks, phones, etc. are to be cleared from the desk. Smart watches and headphones/earbuds are to be removed. Ear plugs may be provided upon request.
- Students should be separated as much as possible given the limitations of classroom size and space.
- Each examination is timed. Students are given 1-minute per multiple choice or true-false question.
- The start and end time of the examination will be listed on the board. It is the student's responsibility to be aware of the end time.
- The instructor will give warnings when there are 10 minutes and 1 minute remaining.
- All phones MUST be placed in a silent or do not disturb mode. A student who accesses their phone during the exam may receive a zero for the exam as well as an affective domain violation.
- Only one student may be released to use the restroom during the exam. Their cell phone must remain in the room.

FISDAP exams

Paramedic module exams are given in a TXSTRR computer lab using the FISDAP exams. Off-campus Paramedic class (satellites) exams will be given in a secure manner agreed to by EMTS Academy.

The purpose of the FISDAP exams is twofold. The first reason is to have an independent third party validate our training, as FISDAP has statistical data to evaluate the effectiveness of their questions. The second reason for the exams is simulate the stress of taking a computer-based NREMT exam as much as possible.

The following steps will be taken every time a FISDAP computer-based test is given:

- All students will be kept out in the hall outside the computer-testing center until the start time.
- When the test is scheduled to begin, one student at a time will present a valid driver's license or government ID (passport, military, CHL or similar government issued photo ID).
- Each student may have a 4-function calculator, pencil or pen, and one piece of blank scratch paper provided by the preceptor during the exam. All scratch paper must be returned to the preceptor prior to leaving the exam room.
- Students may keep their backpacks, wallets and purses in the room but they may NOT access them during the exam.
- Cell phones MUST be turned off and silenced, and placed in the front of the room near the preceptor. Smart watches and headphones/earbuds must also be removed and stored.
- Students may use the bathroom one at a time during the exam. Their phone must stay in the room.

Grading and Validation of Exams

EMT quiz and exam questions have been pre-validated and will not be reviewed by student request. Commonly missed quiz and exam questions are included in each Exam Validation Form that can be accessed with an instructor during office hours. These questions have been found in the book within 1-2 pages of the page referenced in the exam key and will stand.

When all Paramedic students have completed a Fisdap exam, the computer records each student's results. When all the grades have been processed, an "Item Analysis" form is completed by the Program Director. If more than 50% of the class gets a question wrong, that question is highlighted in yellow on the "Item Analysis" and added to the "Exam Validation Report" along with the page number and objective for each question missed. Either the Program Director or Medical Director will determine whether or not a question will be thrown out.

If a question can be found in the book, the question will stand. A question will only be thrown out if the information cannot be found within 1-2 pages of the page referenced on the exam key.

Test retakes

If a student scores less than a 75% on an exam, they will need to retake the exam. A student will be notified by email when they need to retake a test. The student must retake the test in the time specified by the program. Retake dates are predetermined based on instructor availability and cannot extend beyond 8 days from the date of the original exam.

Handling objections

There will always be students who request review about a particular question. Instructors are NOT allowed to do a review of each question as part of class time. Students who want to review a test with an instructor MUST do it outside of regularly scheduled class time, as reviewing the test during class takes unscheduled class time. Office hours are made available for this reason.

Allowing a student to review their exam

A student may NOT review the failed exam the same day the student is scheduled to retake the exam. Reviews must take place prior to the date the retake is scheduled and must be done during instructor office hours by appointment with an instructor.

Medication List

The following list of medications will be tested at each certification level as required by the Program. For each medication, the student is expected to know the following:

- Trade name(s)
- Class
- Mechanism of Action
- Generic name(s)
- Adult dose and route(s) as listed in their textbook
- Indications
- Contraindications
- Side effects

Per the EMTS Medical Director, Paramedic students may give any medication in the clinical or field setting under the **direct** supervision of a preceptor including medications NOT on this list.

EMR	EMT-all of medications listed at the EMR level plus the following:	AEMT- all of medications listed at the EMT level plus the following:	Paramedic- all of medications listed at the AEMT level plus the following:
Albuterol	Epinephrine (IM or SQ)	Acetaminophen (Tylenol)	Activated Charcoal
Aspirin	Inhaled bronchodilators	Atropine	Adenosine
Chemical Antidote Autoinjectors (Mark I NAAK or ATNAA)		Chlorhexadine	Amiodarone
Inhaled bronchodilators		Dextrose (50%, 25%, 10%)	Amyl Nitrite
Nitroglycerin		Dextrose (50%)	Calcium Chloride
Oral glucose		Dextrose 5% in Water IV fluid	Chlorhexadine
Oxygen		Diazepam	Diltiazem
		Diphenhydramine	Dopamine
		Enalaprilat (Enalapril)	Droperidol
		Epinephrine	Labetolol
		Etomidate	Lidocaine
		Fentanyl	Magnesium
		Glucagon	Norepinephrine
		Haloperidol	Oxytocin
		Hurricane/Cetacaine Spray	Proparacaine Hydrochloride
		Hydromorphone	Racemic epinephrine
		Hydroxocobalamin (Vitamin B12)	Sodium Bicarbonate
		Ibuprofen	Terbutaline Sulfate
		Ipratropium	Thiamine
		Ketamine	For classes starting after November 9, 2017
		Ketorolac	metoclopramide

		Lactated Ringer's IV fluid	procainamide
		Lorazepam	esmolol
		Magnesium	
		Methylprednisolone	
		Midazolam	
		Morphine	
		Naloxone	
		Nitroglycerin	
		Nitrous Oxide	
		Normal Saline IV fluid	
		Ondansetron	
		Oxymetazoline	
		Pralidoxime	
		Promethazine HCl	
		Rocuronium	
		Succinylcholine	
		Vasopressin	
		Vecuronium Bromide	
		Xylocaine Gel	

Psychomotor (Skills) Grading/Testing

General Skills Testing

EMS skills are a critical part of providing care to patients. The skills taught by EMTS Academy are compiled from requirements from the National Registry of EMTs, Texas Department of State Health Services (DSHS) requirements as well EMTS Academy program specific requirements.

Skills demonstration and instruction

When teaching new students how to do a skill, **it is extremely important to teach it according to the standard listed on the skills sheet.** This is important for several reasons:

- The program faces liability issues if a student goes and performs a skill on a live patient and causes injury. We as a program need to be able to demonstrate that the skill was taught in the way that is in compliance with state and national standards.
- When you work in EMS for any amount of time, EMS providers may take shortcuts that are NOT allowed in the teaching environment.
- We will teach students the CORRECT way to do a skill. When they graduate from the program, they may find a different way to perform the skill but we will have taught them the correct way.
- It is NOT acceptable for an instructor to say “This is how we do in the classroom but here is how we do it in the real world.”

The current method of instruction involves peer-evaluated skills. This method involves students evaluating each other prior to an instructor evaluation. Using the “Peer-Evaluated” method, students evaluate another student on the performance of the skill a minimum of 3 times before they are allowed to test with an instructor. This leads to higher success rates than standard skills instruction.

Skill practice sessions will be conducted with the intent of preparing students for the practice of patient care on known or suspected infectious patients.

- All students will wear gloves at all times when in skills practice sessions.
- Eye protection will be worn during the practice of airway control procedures, peripheral venipuncture, medication administration, or other procedures, which could potentially expose the student to the splash, or spray of blood or body fluids.

At the completion of each skill practice session students must remove their gloves and wash their hands before handling personal equipment.

Required Equipment-

- Skills Book
- Gloves- (sufficient to be replaced several times in a skills session)
- Goggles
- Masks
- Stethoscope
- Penlight
- Pen- to be supplied by the student
- Note pad- to be supplied by the student
- Watch- to be supplied by the student

Failure to have all required equipment available for the skills practice session will prevent the student from remaining for the skill practice session.

The skill sheets required for each course are listed in the Terminal Competency Form (TCF). The skill sheets with an asterisk (*) require an instructor sign off in addition to the peer sign offs.

Peer-Evaluated Skills

Students must do the following for each skill sheet:

- Completely and accurately fill out each skill sheet
- Record the actual start and end times using a cell phone or Texas State wall clock
- The person doing the evaluation needs to print and sign their name on the skill sheet

A student who fails to accurately and completely fill out a skill sheet on a consistent basis may face disciplinary action in the Affective Domain. A student who intentionally falsifies a skill sheet will be dropped from the program.

Initial Skills Testing

Skills testing typically occurs in a classroom or lab setting. For classes held at Texas State University Round Rock, the current classrooms we may use are 220, 221 and other space as instructed by your instructor.

When practicing, teaching and testing skills, do NOT do it in public hallways or places that could interfere with the regular movement of people throughout the building. In addition, this becomes an issue in the event that someone walks through the test or somehow distracts the student while testing.

When an instructor tests a student on the performance of the skill for the first time, the following guidelines apply:

- This is a TESTING station, not a TEACHING station. The instructor is there to evaluate the student's performance based on the criteria listed on the skill sheet. The instructor is not there to help the student make decisions about appropriate care and treatment but rather to provide information about the scenario.
- The test should be done away from the rest of the students except when the skill requires a student to play the role of a partner or patient.
- Students are NOT allowed to sit immediately near the student being tested.
- The instructor should NOT provide a scenario unless it is specifically required such as for patient assessment-medical and patient assessment-trauma.
- The instructor must note the start and end time of the skill on each time sheet.
- If a student starts a skill and then wants to start over, it will count as their first attempt. The next time they perform the skill will be considered a retest.
- Students are expected to enter the skills station and be ready to test. They are given the skill sheet in advance, have time to practice it in class as well as outside the classroom if they desire.

Retesting Skills

A student who has failed an instructor evaluated skill has the opportunity to retest.

- The student may not retest on the same day of the initial test. It is better if a student practices the skill again and retests on another day.
- A retest of a skill should be done by a different instructor whenever possible.
- Retests may be videotaped
- It is recommended that a second instructor or administrator attend and observe all retests.

A student will be placed on academic probation if the student fails the second instructor skills test, or multiple skills. During remediation, the student must complete 3 additional peer evaluations prior to attempting a third instructor skills test. If the student fails a third instructor skills test, the student will be dismissed from the program and will not be eligible to graduate.

Appropriate Behavior During Skills

EMTS and its staff are aware of the risk of inappropriate behavior during the hands-on portion of skills stations. Students are expected to display professionalism and tact while serving in the role of patient, rescuer or observer. Students are expected to follow ethical and legal guidelines.

Should a student find they are uncomfortable with a particular skill or position, it is the responsibility of that student to make their feelings known to the instructor prior to the start of skills practice.

Should a student feel the actions of another student or an instructor cross the line of professionalism into overt sexual contact the student shall notify both the student and instructor involved as well as the Program Director as soon as possible. Any student who believes they have been sexually discriminated against may meet with or file a written complaint with the Program Director.

The following skills may involve practice in or around the chest or pelvis areas:

- Traction Splinting
- Auscultation of Breath Sounds
- Foreign Body Airway Obstruction
- Assessment of Pulse and Respirations
- Patient Assessment/Physical Exam
- Application of ECG Electrodes
- Blood Pressure by Auscultation
- Application of 12-Lead ECG Electrodes
- Blood Pressure by Palpation
- Supine Spinal Immobilization
- Dressing and Bandaging
- Seated Spinal Immobilization
- Splinting

Scenario practice requires an attitude and demeanor that does not detract from the scenario created. The student is required to remain in character, communicate with the “patient” and perform all skills as appropriate as would be expected on a real live call.

NREMT Skill Testing for ALS Students

NREMT requires Paramedic students to be tested during a NREMT Psychomotor Exam Test. The student will need to complete all of the skills listed in the Skills Book in order to be eligible to test with NREMT.

Coordinating a NREMT skills exam is an extremely difficult process and requires a significant amount of equipment, instructors, time and resources. As such, EMTS Academy typically does not offer testing at our facility. Students should check the NREMT website for a list of psychomotor exam dates offered in the area.

If EMTS will be offering an NREMT exam, students will be notified in advance.

Practicing Advanced Skills

Students enrolled in the Paramedic program may practice advanced skills, in the presence of a program instructor or clinical preceptor, while on clinical rotations only. Students are limited to practicing only skills previously taught by the faculty of EMTS.

The student liability policy covers students to perform advanced skills during scheduled clinical rotations. Students who are otherwise licensed or certified to perform advanced skills are advised that the liability insurance does not cover them in the non-student capacity. This advice applies to students whose Medical Director has approved them to practice skills above their current level of training.

Violations of this policy will result in the immediate removal of the student from further clinical rotations and removal from the program.

COURSE OUTLINES

EMT Course Hours and Topics-236.5 hours

Day 1 Orientation-6.5 hours Orientation on course requirements and expectations; assigning class roles; explanation of scheduling clinical and field shifts; advice on how to be successful in the course
Module 1: Preparatory-57 hours Emergency Medical Care Systems, Research, and Public Health, Workforce Safety and Wellness of the EMT, Anatomy, Physiology, and Terminology, Pathophysiology, Medical, Legal, and Ethical Issues, Documentation, Communication / Radio Ops, Lifting and Moving Patients, Baseline Vital Signs, Monitoring Devices, and History Taking, Airway Management, Respiration and Artificial Ventilation, Scene Size-up / Hostile Scene Recognition, Patient Assessment
Module 2: Trauma Emergencies-33 hours Trauma Overview, Multisystem Trauma and trauma in Special Patient Populations, Shock and Resuscitation, Bleeding and Soft Tissue Trauma, Head Trauma, Spinal Column and Spinal Cord Trauma, Eye, Face and Neck Trauma, Chest Trauma, Abdominal and Genitourinary Trauma, Burns, Musculoskeletal Trauma and Non-traumatic Fractures, Pharmacology and Medication Administration
Module 3: Medical Emergencies-61 hours Respiratory Emergencies, Cardiac Emergencies, Altered Mental Status, Stroke, and Headache, Seizures and Syncope, Acute Diabetic Emergencies, Environmental Emergencies, Submersion Incidents: Drowning and Diving Emergencies, Anaphylaxis Reactions, Lifespan Development, Pediatrics, Geriatrics, Toxicology, Behavioral Emergencies
Module 4: Special Patient Populations, Hazardous Materials and Operations-28 hours Patients with Special Challenges, The Combat Veteran, Ambulance Operations and Air Medical Response, Gaining Access and Patient Extrication, Hazardous Materials, Multiple Casualty Incidents and Incident Management, EMS Response to Terrorism Involving Weapons of Mass Destruction
Module 5: Final Exam and Preparation for Clinical/Field Shifts-13 hours
Module 6: Clinical and Field Experience-40 hours 16 hours in Emergency Room 24 hours with EMS on the ambulance
Graduation-4 hours

Paramedic Course Hours and Topics – 1069 Hours

<p>Day 1 Orientation-6.5 hours Orientation on course requirements and expectations; assigning class roles; explanation of scheduling clinical and field shifts; advice on how to be successful in the course</p>
<p>Anatomy and Physiology-32 hours Discusses the anatomy and physiology of all body systems including: cell structure, musculoskeletal, nervous, endocrine, urinary, circulatory, digestive, reproductive; acid-base balance, types of shock</p>
<p>Pharmacology-76 hours Basic principles of pharmacology, drug and chemical classes, IV fluids and electrolytes, IV therapy; Drugs affecting the following: central nervous system, respiratory system, cardiovascular system, endocrine system, GI system, eye/ear drugs, skin and diet drugs, cancer and infectious drugs, environmental and HazMat drugs; drug calculations, IV piggyback infusions, IM and SQ drugs, intranasal medication administration</p>
<p>Preparatory-25.5 hours Well Being of the Paramedic, Roles and Responsibilities, Illness and Injury Prevention, Legal and Regulatory Issues, Ethics, Medical Terminology, Drug Calculations Math Refresher, Life Span Development, Public Health and EMS, Hemorrhage Control, Glucometer, Joint Splinting, Long Bone Splinting, Traction Splinting, Spinal Immobilization Adult (Supine Patient), Spinal Immobilization Adult (Seated Patient)</p>
<p>Patient Assessment-21 hours Therapeutic Communication, History Taking, Patient Assessment, Integumentary Assessment, Obtain a Patient History from an Alert and Oriented Patient, Comprehensive Normal Adult Physical Assessment Techniques, GI/GU Assessment, Cardiovascular Assessment, Documentation, Comprehensive Normal Pediatric Physical Assessment Techniques</p>
<p>Airway Management and Ventilation-42 hours Airway Management, Capnography and Capnometry, Direct Orotracheal Intubation Adult, CPAP and PEEP, RSI Lecture, Direct Orotracheal Intubation Pediatric, Nasotracheal Intubation Adult, Supraglottic Airway Device Adult (Combitube, LMA, King, Cobra, etc.), Needle Cricothyrotomy (Percutaneous Translaryngeal Ventilation), Surgical Cricothyrotomy, Crew Resource Management/Team Lead/Member Orientation/Scenario Practice</p>
<p>Shock and Resuscitation-60 hours Shock and Resuscitation, Burns, Trauma Adult Physical Assessment, Head and Face Trauma, Trauma Endotracheal Intubation Adult, Spinal Trauma, Thoracic Trauma, Pleural Decompression (Needle Thoracostomy), Abdominal Trauma, Musculoskeletal Trauma, Environmental Emergencies, Farm/Rural Response, Wilderness EMS, PHTLS card course</p>
<p>Cardiology-136 hours Cardiac Anatomy and Physiology and Electrophysiology, 1 & 2 Rescuer CPR for Adults, Children and Infants, Bag-Mask Technique and Rescue Breathing for Adults and Children, Automated External Defibrillator, Relief of Choking in Infants and Victims 1 Year of Age and Older, A&P: Circulatory System, Sinus Rhythms, Sinus Rhythm Practice, Atrial and Junctional Rhythms, Atrial and Junctional Rhythm Practice, Sinus, Atrial and Junctional Rhythm Practice, Ventricular Rhythms, *Synchronized Cardioversion, *Defibrillation (Unwitnessed Arrest), AV Blocks and Pacemakers, *Transcutaneous Pacing, Ischemic Syndromes and Myocardial Infarction, 12-Lead ECG Essentials, 12 Lead Axis Determination, Bundle Branch Blocks and Hemiblocks with 12 Lead ECG practice, 12-lead Axis Determination, BBB and Hemiblock practice, 12 Lead Axis Determination, Bundle Branch Blocks and Hemiblocks with 12 Lead ECG</p>

practice, 12-lead Axis Determination, BBB and Hemiblock practice, ACLS card course, Oral Station, CHF and Cardiogenic Shock, Static Cardiology, Dynamic Cardiology, Hypertension, Syncope, Aortic Aneurysm, Pulmonary Embolus, and Peripheral Vascular Disease

Medical Emergencies 77.5 hours

Head, Ears, Eyes, Nose and Throat, A&P: Special Sensory Systems, A&P: Respiratory System, Respiratory 1 and 2 lectures, Neurology, A&P: The Nervous System, Endocrine Disorders, A&P: The Endocrine System, Immune System, A&P: Lymphatic and Immune System, A&P: The Gastrointestinal System, Gastrointestinal Disorders, A&P: The Urinary System, Metabolism and Body Fluids Balance, Renal and Urological, A&P: Skeletal Tissue, A&P: Muscle Tissue, Musculoskeletal Disorders, A&P: Integumentary System, Skin Disorders, A&P: Cells, A&P: The Nervous System, Endocrine Disorders, A&P: The Endocrine System, Immune System, A&P: Lymphatic and Immune System, A&P: The Gastrointestinal System, Gastrointestinal Disorders, A&P: The Urinary System, Metabolism and Body Fluids Balance, Renal and Urological, A&P: Skeletal Tissue, A&P: Muscle Tissue, Musculoskeletal Disorders, A&P: Integumentary System, Skin Disorders, A&P: Cells, Toxicology, Infectious and Communicable Diseases, Handling Patient Refusals and AMA Refusals, Psychiatric Disorders and Substance Abuse, Hematologic Disorders

Special Patient Populations-84.5 hours

A&P: Reproductive System and Human Genetics, OB/GYN, Neonatology, Normal Delivery with Newborn Care, *Abnormal Delivery with Newborn Care, Pediatric Assessment, Pediatric Medical Emergencies, Pediatric Respiratory, Pediatric Trauma, Pediatric Resuscitation, PALS card course, A&P: Reproductive System and Human Genetics, OB/GYN, Neonatology, Normal Delivery with Newborn Care, *Abnormal Delivery with Newborn Care, Pediatric Assessment, Pediatric Medical Emergencies, Pediatric Respiratory, Pediatric Trauma, Pediatric Resuscitation

Operations-48 hours

EMS Deployment and SSM, Crime Scene Awareness, EVOC, EMS Command and Control, Communications, Dispatch Activities, Vehicle Rescue and Rescue Awareness Operations, Response to Hazardous Materials Incidents, Tactical EMS, Disaster Response and Domestic Preparedness, Table Top Exercise, Disaster Exercise, Tactical EMS Exercise, Resumes and Interviewing

Total Classroom-394.5 hours

Total Lab-214.5 hours

Clinical Hours-220 hours

Cardiac Cath Lab (CCL)-8 hours
Emergency Room-136 hours
ICU (Critical Care)-24 hours
Labor & Delivery-12 hours
Operating Room-24 hours
Pediatrics-16 hours
Psychiatrics (optional)-8 hours
Fire Department (optional)-12 hours
Victim Services (optional)-8 hours
STATAir (optional)-12 hours

EMS Field Internship-240 EMS field hours

APPENDIX A

- Receipt of Enrollment Policies (Form 005)
- Record of Previous Education and Training (Form 010)