 Definitions:  
Lead Instructor: The individual responsible for coordinating the didactic portion of the Parkland College Paramedic class for a given year.

Faculty Team: The faculty group made up of the Lead Instructor and the co-Lead Instructor from the other EMS System and the Parkland College Paramedic Program Director.

Medical Direction Team: Group made up of the Faculty Team and one or both of the EMS System Medical Directors.

Policy Signature Sheet
At the Program Orientation session for the Parkland College Paramedic course, the Paramedic Program Lead Instructor distributes to the class participants, copies of the Educational Policies relative to that course. To ensure that all participants read and understand the policies, they are required to sign a form verifying their understanding (See Appendix E Education Policies Signature Sheet). Because Parkland Paramedic Course students will be practicing assessments and other skills on each other, a permission form for this also must be signed.

The signed forms must be returned to the EMS Lead Instructor before the beginning of the first class session. The signed forms are kept by the EMS Lead Instructor in the participant's student file.

Any participant who is unwilling to sign the form will meet with the EMS Lead Instructor and the Medical Direction Team to discuss the rationale of the policy and his or her concerns.

Accommodation: Students who have documented issues with reading and/or other learning issues are responsible for seeking accommodation for testing and other academic activities. Coordination of accommodation is done through the Center for Academic Success as noted on the course syllabus.

Curriculum
EMT-Paramedic courses offered by Parkland Community College follow the 2009 National Emergency Medical Services Education Standards of the National Highway Safety Administration as mandated by the Illinois Department of Public Health. The courses consist of the minimum 515 hours of core material with extra class time allotted by the individual instructor to allow for skills practice based on completion of required competencies. The 576 hours of clinical experience and field internship are obtained outside of the regular classroom time. Upon successful completion of the Parkland College Paramedic Course, the student is able to perform patient care at the Paramedic level. The Illinois Department of Public Health approves the courses sixty (60) days prior to the beginning of the class.

Classrooms
All Paramedic courses are taught in a structured classroom at a location approved by the Parkland Paramedic Program Lead Instructor. The classroom space must have adequate seating and writing surfaces for the students, appropriate audiovisual equipment available and sufficient space for skills labs.

Class Size
Due to the required practical skills in the curriculum, class size must be limited. The minimum number of students for a Paramedic course is 10 and the maximum is 25. Should it occur that a class has more than 25 qualified applicants, the Medical Direction Team makes final decisions on admission.

Class Materials
Approved textbooks are available to all students on or before the first class session. These textbooks are approved by the Parkland Paramedic Faculty Team and follow the 2009 National Emergency Medical Services Education Standards of the National Highway Safety Administration. Each student will also receive a printed syllabus and course outline for the class indicating dates and times of class, topics to be covered, accompanying reading assignments, dates of class tests, and the date of the licensure exams. Additional workbooks, handouts and homework may be distributed at the Faculty Team’s discretion.

Classroom Behaviors
All students are expected to behave in a professional manner in class showing respect for others, Parkland College, the facility and the equipment.
Eating is allowed in the classroom if care is used to protect school property and garbage is placed in proper receptacles.

No tobacco products of any kind, including chewing tobacco, are allowed on school property. All of Parkland College is a smoke free campus.

Students are expected to converse in a professional manner and refrain from using profane or defamatory speech at all times.

All cell phones must be turned off or muted for the duration of the class. Texting is prohibited during class sessions. Cell phones may be used for reference as appropriate.

Admission Requirements
Students applying for admission to Parkland Paramedic Program courses must meet the following requirements:

- Must be 18 years of age or older prior to taking the Illinois Licensure examination.
- Must have a high school diploma or the equivalent.
- Must have a current American Heart Association CPR for Healthcare Provider card, or American Red Cross CPR for the Professional Rescuer card.
- Must have current Illinois or National Registry EMT-Basic or EMT-Intermediate license.
- 300 hours of documented pre-hospital patient care experience.
- A letter of support from an Advanced Life Support (ALS) agency for the purposes of completing the pre-hospital clinical hours and a field internship. If the ALS agency withdraws support, a letter of notification must be sent to the Parkland Paramedic Program Lead Instructor.
- Successful completion of all prerequisites for the course including English and Math assessment,
- Successful completion of a pre-course assessment of Basic EMT knowledge.

It is the policy of the Parkland Paramedic Program to consider all applicants for EMT-Paramedic courses without regard to race, color, age, religion, sex or national origin. All applicants selected for the program will be selected based on the admission requirements. Applicants not meeting these requirements will not be considered for the program.

Tuition and Fees
The cost of the EMT-Paramedic courses held by the Parkland Paramedic Program is based on the cost of the following items:

- Parkland College Tuition
- books and materials
- student uniform

Attendance Policies
Paramedic students are expected to attend all classes, arriving promptly. Attendance is taken at the beginning of each class. Due to the nature of the Paramedic course, 100 percent attendance is expected of all students. However, illness and/or extraordinary circumstances may arise. The Paramedic student may miss no more than 10 percent of scheduled classes each semester. Absence exceeding 10 percent of class time each semester does not meet the requirements for course completion. This translates to a total of 44 hours of missed class/lab. Absences exceeding 10 percent of class time does not meet the requirements by the Illinois Department of Public Health for course completion and is grounds for dismissal from the class.

EMS 111 8 hours
EMS 113 12 hours
EMS 114 16 hours
EMS 115 8 hours

If illness or extraordinary circumstances arise, preventing the Paramedic student from attending class, the Paramedic student must contact the Lead Instructor or the assigned Team Leader as soon as possible. Situations involving extraordinary circumstances may be considered an excused absence by the Lead Instructor.

When a Paramedic student is absent, it is his/her responsibility to make up the work that was missed, including quizzes. If assistance is required to make up the material, the student must contact the Lead Instructor to make an appointment.
If classes are cancelled due to weather conditions, the students are notified via radio and television news broadcasts as detailed in the Parkland Student Handbook. Class cancellations may also be communicated via the student call down list by phone or email.

**Written Testing**

Twenty-four hours prior to most class sessions a 10 to 25 question quiz covering material from previous classes will be posted online on the Parkland Cobra website. The quiz must be done before class starts. Missed quizzes are graded as zero unless the Lead Instructor is contacted ahead of class with a reason for why the quiz was not completed. These circumstances will be evaluated on a case by case basis. An average score of 80% is required for quizzes throughout the course. Grades of less than 80% on a quiz are reviewed by the Lead Instructor and discussed with the student to determine if additional remediation is required. Once the quiz is completed, it will be posted on COBRA for reference for future exams.

The Lead Instructor may provide study questions and/or homework throughout the course. The grades from this work are considered equal to a quiz grade and are added to the student's quiz grade average. Homework that is not turned in is not included in the total of quiz scores. Ten percent is deducted for every class session that homework is turned in late.

There are multiple-choice examinations after each Division, or natural break in the course. The examination dates are outlined on the syllabus. Examinations are scheduled to be taken in the Parkland College H Wing Computer Lab outside of regular class time. A cumulative final examination is also given. Each student must have a cumulative score of at least 80% for these Division Examinations and the final examination. If a student fails to maintain an 80% average for examinations, the Lead Instructor reevaluates the student's progress, and appropriate action is taken. This action may include dismissal from the program.

Students are required to maintain a combined average of all quizzes, homework, and exams of 80% for the duration of the course.

A student's final grade is calculated on a percentage basis and assigned a letter grade according to the following scale:

- A = 93-100
- B = 86-92
- C = 80-85
- F = < 80

**Practical Exams**

The Paramedic Student is expected to satisfactorily complete the practical examinations specified by the 2009 National Emergency Medical Services Education Standards of the National Highway Safety Administration in order to be eligible to take the a Licensure Examination. Skill check sheets direct the evaluation of practical skills. The student may retake each of the practical exam station once.

1. History Taking and Physical Examination
   - Patient History from an Alert and Oriented Patient
   - Comprehensive Normal Adult Physical Assessment Techniques
   - Comprehensive Normal Pediatric Physical Assessment Techniques

2. Airway, Oxygenation and Ventilation
   - Direct Orotracheal Intubation Adult
   - Direct Orotracheal Intubation Pediatric
   - Nasotracheal Intubation Adult
   - Supra-glottic Airway Device Adult
   - Surgical airway
   - C-PAP
3. Trauma
   - Trauma Adult Assessment
   - Trauma Endotracheal Intubation Adult
   - Pleural Decompression
   - Basic Trauma Skills
     - Spinal Immobilization Adult Supine
     - Spinal Immobilization Adult Seated
     - Joint Splinting
     - Long Bone Splinting
     - Traction Splinting
     - Hemorrhage Control

4. Medical
   - Medical and Cardiac Patient Assessment
   - Intravenous Therapy
   - Intravenous Bolus Medication Administration
   - Intravenous Piggyback Infusion
   - Intraosseous Infusion
   - Intramuscular and Subcutaneous Medication Administration
   - Intranasal Medication Administration
   - Inhaled Medication Administration
   - Glucometer

5. Cardiac Arrest Management
   - 12 Lead EKG
   - Synchronized Cardioversion
   - Defibrillation
   - Transcutaneous Pacing
   - CPR

6. Obstetrics
   - Normal Delivery with Newborn Care
   - Abnormal Delivery with Newborn Care

**Final Practical Examinations:** All Parkland College Paramedic Program students will take the National Registry EMT Psychomotor Examination as the final practical for the program. If the student does not pass all of the stations of the psychomotor exam on the day of the testing (retakes included) and if that student does not intend to take the NREMT written exam, retesting of the failed stations will be coordinated with the Medical Director, Program Director and Lead Instructor at an arranged time. Any student intending to take the NREMT written exam must pass all the stations of the psychomotor exam either on the day of testing or at another testing site.

**Required Certifications:**
Embedded in the syllabus of the Parkland College Paramedic Program are the national certification courses:
   - Advanced Cardiac Life Support (ACLS)
   - Neonatal Resuscitation (NRP)
   - Pediatric Advanced Life Support (PALS)
   - Pediatric Emergencies for Prehospital Providers (PEPP)
   - International Trauma Life Support (ITLS)

All paramedic students are expected to attend these courses and successfully complete them in order to complete clinical progression. If a student is unable to successfully complete a certification course scheduled in the program, it is his/her responsibility to find and complete a certification class on their own within the time range of the semester.

**Clinical Experience**
Clinical experience is designed to enable Paramedic students to refine practical skills in a real, but supervised setting. The objectives of clinical experience are to:
   - Apply skills learned in the didactic portion of the training, in a real, but supervised environment.
   - Relate pathophysiology and clinical signs and symptoms to an actual patient situation.
   - Observe and participate in patient care.
   - Begin to develop organizational and decision making ability regarding patient assessment and treatment.
The curriculum requires clinical time in a variety of areas as detailed in the course outline. Timelines for the initiation and completion of clinical, guidelines for documentation and clinical competency expectations are outlined on the syllabus.

Additional clinical experiences may be arranged for a class dependent upon the clinical sites available to the instructor. Time requirements for clinical rotations may be increased if deemed necessary by the Lead Instructor for remediation of students.

The EMS Lead Instructor coordinates scheduling of clinical experiences. **CLINICAL TIME MAY NOT BE PERFORMED WHILE ON DUTY, EITHER IN THE EMERGENCY DEPARTMENT OR ON AN AMBULANCE.**

It is the responsibility of each student to insure that all clinical experience requirements are completed and documented at the appropriate time. It is also the student's responsibility to see that this documentation is submitted to his/her EMS Lead Instructor. Failure to complete clinical assignments according to the timelines on the course syllabus may result in disciplinary action up to and including dismissal from the course.

Each student is expected to report to the designated contact person in the clinical area at the scheduled time. The student must be appropriately attired as directed by the policy entitled “Dress Code”.

If, for some unavoidable reason, the student will be late or unable to attend a clinical experience, the EMS Lead Instructor or the Clinical Coordinator must be notified immediately. A student who does not report to clinical and does not contact the Lead Instructor that he/she will not be able to report to clinical is considered absent. One absence by a student is grounds for corrective action in the form of a verbal warning. Two absences by a student are grounds for corrective action in the form of a written warning. Three absences by a student are grounds for corrective action that may include dismissal from the class.

Students who routinely schedule clinical and cancel at the last minute are preventing other students from signing up for those times and are subject to counseling as outlined in the Corrective Action policy.

Clinical Experience forms are provided for each student. See Appendix A. These forms are used to record the activities completed, experience gained and the time spent in the clinical area. The clinical preceptor assigned to supervise the student shall complete the evaluation as specified by the form. The Clinical Experience form also has space for the Paramedic student’s comments and observations about the clinical experience.

Clinical Experience forms must be handed in to the Lead Instructor promptly after the experience. In order to perform patient care skills in the clinical setting, students must have successfully completed the practical examination for that skill. In order to comply with HIPAA standards, no patient care records and no data on which patients can be identified are to be turned in with clinical forms. The Paramedic course work is not considered complete until the clinical experience is done.

Paramedic students who are in the clinical areas are expected to present themselves in a professional manner, both in conduct and appearance.

**Clinical Dress Code**
Appropriate dress for clinical areas includes:
- A polo shirt with a collar, with a Parkland Health Professions identifier purchased specifically for class.
- Dress slacks or skirt in navy blue or black, or agency-approved uniform pants.
- Dress shoes, or black or white leather athletic shoes. All shoes must be clean and polished. No canvas tennis shoes.
- Parkland EMS Student Identification badge
- No perfume or cologne.
- One set of stud earrings per ear. No other visible piercings allowed.
- One plain metal ring only.
- No tongue jewelry allowed.
- Skin art must be covered.

All attire must be clean and wrinkle-free. Students must wear the student identification tags. No other pins or insignia shall be worn. Any student not meeting the above expectation will not be allowed to do clinical time until his/her appearance is improved to meet this standard.
**Student Evaluations**
The Paramedic Program Lead Instructor monitors the progress of students by reviewing all testing materials and clinical report forms. The Lead Instructor will verbally counsel any student who is consistently having difficulty with the class material as evidenced by low quiz scores, or who has cumulative quiz and/examination scores lower than 80%. Arrangements may be made at that time to provide additional tutoring.

Written evaluations are done on each student a minimum of 4 times during the 12 months of the course using the Professional Behavior Evaluation form. (See Appendix B) The evaluations are reviewed by the student and instructor at a scheduled session, and signed. The Medical Direction Team at their discretion may also review the evaluations. A copy of the signed evaluation is placed in the student's class file. An additional copy is sent, with the student's permission to the coordinator of the EMS agency providing the student's pre-hospital clinical experience.

**Unethical Behaviors**
From the beginning of the EMS education process, EMS students are expected to follow Professional Conduct Standards for EMTs. Some behaviors go against the Professional Conduct Standards and are unacceptable. A student may be dismissed for any of the following behaviors:

- Engaging in dishonorable, unethical, or unprofessional conduct during the delivery of patient care, while conveying patient information, or while otherwise functioning in the classroom or clinical setting.
- Engaging in conduct likely to deceive, defraud, or harm the public while functioning in a clinical setting.
- Physical impairment to the extent that the EMT student cannot physically perform the emergency care and life support functions in the clinical setting for which he/she is required to perform. A licensed physician must verify the physical impairment.
- Mental impairment to the extent the EMT student cannot exercise the appropriate judgment skill and safety to perform emergency care and life support functions in the clinical setting for which he/she is required to perform. A licensed physician must verify the physical impairment.
- Intoxication or personal misuse of any drugs or the use of any liquors, narcotics, controlled substances or other drugs or stimulants in such a manner as to adversely affect performance or activities in the classroom or clinical setting.
- Intentional falsification of personal student records or making misrepresentation involving patient care in the clinical setting.
- Abandoning or neglecting a patient requiring emergency care in the clinical setting.
- Unauthorized use of or removal of narcotics drugs supplies, or equipment from any ambulance, health care facility, institution or work place.
- Performing or attempting emergency care techniques, or procedures without proper permission, licensure, training or supervision.
- Discriminating in the rendering of or withholding of emergency care as directed in the clinical setting because of race, sex, creed, religion or national origin.
- Medical misconduct or incompetence, or a pattern or continued or repeated medical misconduct or incompetence in the provision of emergency care in the clinical setting.

**Corrective Action**
Parkland Community College and its shareholders are dedicated to providing educational opportunities for students whose performance and conduct are satisfactory.

The Lead Instructor and the Faculty Team assist students with class-related problems on an individual basis. However, at no time does the Lead Instructor sacrifice the standards of the program. Students who fail to meet these standards are referred to the Medical Director and may be dismissed from the program.

EMS students are expected to maintain a proper and professional manner in class as well as in the clinical area. These Professional Conduct Standards are outlined in the policy entitled "Unacceptable EMS Student Behaviors". Students whose conduct deviates from the Professional Conduct Standards will be given an opportunity to correct their behaviors through a process of Corrective Action.

**Records of Conversation**: Face-to-face conversations and emails between the Lead Instructor and students are documented as Records of Conversation. These records are forwarded to the Program Coordinator and placed in the student’s file. After two Records of Conversation on the same topic, the issue will progress to a written warning. Records of conversation may address issues such as attendance, completion of clinical assignments, disruptive behaviors and quiz/homework grades.
VERBAL WARNING: The EMS Lead Instructor informs the student in a face-to-face conference of the reported misconduct, discuss means of correction and inform the student of the consequences if the misconduct is not corrected. Documentation of this conference is placed in the student's file, and the student signs the documentation indicating that the warning was received.

WRITTEN WARNING: The EMS Lead Instructor informs the student in a face-to-face conference of the misconduct. At this time, the reported misconduct is explained, a means of correction detailed and the consequences of continued misconduct discussed. A written description of the misconduct is given to the student at the time of the conference. The student signs the warning indicating that it was received. The student keeps a copy of the written warning. Documentation of the written warning and conference are placed in the student's file. Two written warnings on the same topic in the same semester or successive semesters may lead to dismissal from the program.

DISMISSAL: In cases of serious misconduct or continued misconduct, the Medical Direction Team and EMS Lead Instructor may jointly decide to dismiss the student from the program. That decision is final. Please note that cases of gross misconduct may result in a bypass of the normal corrective action process with immediate dismissal from the program. Any student whose behavior is addressed with corrective action may appeal this action through the Medical Direction Team. All appeals are held in face-to-face meetings with the Medical Direction Team and the lead instructor. Individuals who are dismissed from the program will not be readmitted to future Parkland College Paramedic courses.

Dismissal from the Program
Before an EMS student can be dismissed from a program, the guidelines found in the policy entitled "Corrective Action" must be followed. Written documentation of all corrective action must be placed in the student's file kept by the Paramedic Program Lead Instructor.

An EMT-Paramedic student may be dismissed from the training program for any of the following conditions:
- More than 10 percent of the scheduled class time per semester for any reason.
- Consistent tardiness (being late by more than 15 minutes on more than two occasions) that reflects on the student's overall performance.
- Violations of Professional Conduct Standards.
- Breach of patient confidentiality.
- Consistent failure to achieve a combined average of 80 percent on course work (quizzes, homework and examinations).
- Failure to complete the minimum required hours of clinical time and/or failure to make progress in completing the clinical competencies as outlined in the syllabus for 2 evaluation sessions in a row.
- Cancellation or modification of scheduled clinical times on more than 3 occasions.
- A letter is sent to the EMS Lead Instructor from the sponsoring ALS agency withdrawing support for field internship, and no support is available from another agency.
- Failure to comply and/or abide by the policies of the training program as outlined in the Parkland Paramedic Program Policies.
- The student exhibits an unprofessional attitude and behavior in the classroom and/or clinical settings. This unprofessional attitude and behavior may be observed and/or reported during interactions with other students, instructors, hospital personnel, pre-hospital personnel and EMS office staff. Disrespect towards anyone at anytime will not be tolerated.

Timely Completion of Program Requirements
Students enrolled in EMS initial education courses are expected to complete all class requirements in a timely manner.

Keeping track of class requirements in clinical and field internship is the responsibility of the student.

No student will be allowed to take the written examination for licensure until all class assignments; clinical hours and field internship are completed.

Paramedic students have ninety (90) calendar days to complete all of the Field Internship calls for EMS 238.

If any student is unable to complete the required clinical and/or field internship due to unexpected circumstances such as serious illness of the student or serious illness and/or death of a close relative he/she may request an extension. Requests for extensions are reviewed on a case-by-case basis and approved or disapproved by the Lead Instructor, Faculty Team and the Medical Direction Team.
Voluntary Withdrawal from the Program
If a Paramedic student wishes to withdraw from the education program, he/she must submit a letter stating this intent to the EMS Lead Instructor within five days of the last class attended. If eligible for a course withdrawal, the student must obtain a Course Withdrawal form from the Health Professions Office L117 and complete the student portion of that form.

If the student fails to submit a withdrawal letter and/or schedule an exit interview within the times stated in this policy, he/she must meet with the Medical Direction Team prior to being admitted to any future Parkland Paramedic Programs.

Reinstatement into the Program
In order to be reinstated into the Parkland College Paramedic Program, the student must
- Write a letter to the Paramedic Program Director addressing the issues that prompted the inability to remain in the program previously and what actions the student has taken to remediate these issues and a plan for future success.
- Meet with the Medical Direction Team.
- Complete the Pre-admission requirements.

Students may be reinstated into the Paramedic Program at the beginning of the semester in which they voluntarily withdrew from the program. No one will be admitted to the Paramedic Program more than twice.

Field Internship
Paramedic students have two types of patient contact opportunities during their course: clinical hours and field internship. All clinical hours and field internship patient contacts must be completed prior to taking the written examination for licensure.

Paramedic students may perform skills as a team member during field experience clinical hours without taking total responsibility for the patient care and record documentation. Clinical hours are procedure-oriented and occur at the beginning of the Paramedic course. (See the policy entitled Clinical Experience.) The EMS Lead Instructor will notify the preceptors in writing when EMT students may begin practicing particular skills in the field. If a new skill is being evaluated, the student is critiqued based on the critical criteria outlined on the Practical Skills sheets. (The Practical Skills sheets are not completed for these critiques just used as a reference.)

Paramedic students who have completed required testing and clinical hours as outlined in this policy may assume responsibility for patient care as a Team Leader and record documentation under the supervision of a preceptor. These patient contacts are part of Field Internship and occur during scheduled clinical time. The EMS Lead Instructor will notify the preceptors in writing when Paramedic students may begin Field Internship patient contacts. Paramedic students must successfully complete a required number of EMS Calls/Patient Contacts as outlined in the syllabus. The preceptor may require additional patient contacts on a case-by-case basis. Documentation of these patient contacts is on a Field Evaluation Form. (See Appendix C for the Field Internship form)

Because the paramedic student is acting in that capacity the Prehospital care report for a call in which the student is acting as team leader must be completed by the preceptor. Instead, the student must submit a written or typed narrative of the call which includes the nature of the call, gender and age of the patient, assessments, vital signs and other materials pertinent to the call. To comply with HIPAA standards, the name, address and any information that could identify the patient must be removed from the Prehospital report form and the narrative prior to submitting to the EMS Lead Instructor. In order for a Field Internship/Team Leader call to be counted the paramedic student must be graded by the preceptor at "Competent" or better. Clinical Evaluation Forms and Field Evaluation Forms must be completed by the EMS preceptor in a timely manner and submitted to the EMS Lead Instructor.

In order to expedite the Field Internship process, paramedic students may begin the Team Leader/Field Internship process during clinical hours based on the following criteria.
- In order to participate in Field Internship calls students must have a grade average of greater than 80% and all clinical hours and assessments required up to that point have been submitted.
- The paramedic student will present documentation from the Paramedic Course Lead Instructor, the Program Director and the EMS Medical Director stating that they have clearance to act in a Team Leader role for each Phase.

Phase 1 Team Leader calls may be done for a total of five (5) calls for patients with Adult Medical Emergencies following:
- Successful completion of Advanced Cardiac Life Support
- Successful progression of EMS 114
  - Grade of greater than 80% average for EMS 114
• Grade of greater than 80% for the Oral Exam at the end of the Cardiac Module
• Completion of Cath Lab and Critical Care clinical requirements

An ALS Cardiac Call must include:
• Patients with Cardiac signs and symptoms
• ALS Cardiac assessments including EKG monitoring
• ALS Cardiac treatments including Cardiac Medications and vascular access.

Phase 2: Team Leader calls may be done for a total of five (5) calls for patients with Adult Medical Emergencies following:
• Successful completion of Advanced Cardiac Life Support
• Successful completion of EMS 114
  • Grade of greater than 80% average for EMS 114
  • Grade of greater than 80% on the final exam for EMS 114
  • Grade of greater than 80% for the Oral Exam at the end of EMS 114
  • Completion of all clinical requirements for EMS 114

Phase 3: Team Leader calls may be done for a total of five (5) calls for patients with Pediatric and/or Obstetrical Emergencies following:
• Successful completion of either Pediatric Advanced Life Support (PALS) or Pediatric Emergencies for Pre-hospital Providers (PEPP)
• Maintenance of a grade of greater than 80% for the Pediatrics and Obstetrics Module.
• Grade of greater than 80% for the third Oral Exam
• Grade of greater than 80% for Cumulative Exam #6 covering Pediatrics and Obstetrics
• Completion of clinical requirements for Pediatrics and Obstetrics

Phase 4: Team Leader calls may be done for a total of five (5) calls for patients with Traumatic Emergencies following:
• Successful completion of Advanced International Trauma Life Support (ITLS)
• Grade of greater than 80% for Cumulative Exam #7 covering Trauma
• Completion of clinical requirements for Trauma

Phase 5: Team Leader calls are done for the remaining thirty (30) calls of the Field Internship for patients that warrant ALS care following:
• Successful completion of the Parkland Paramedic Course
  • Grade of greater than 80% average for EMS 115
  • Grade of greater than 80% for the Oral Exam at the end of EMS 115
• All clinical requirements and assessments are completed

Required Calls: During the Team Leader/Field Internship the following calls are required:
• Load and Go Trauma
• Significant cardiac call (This could be an arrest, or treating dysrhythmia with either medications or cardioversion)
• Prehospital intubation. This could be on a full arrest, or on impending respiratory arrest, for airway protection, etc.
  If a student intubated a cardiac arrest, one call COULD count for both categories.
• Use of CPAP to treat respiratory failure (from any cause like CHF, COPD/asthma, etc.)

If the candidate completes the required 50 calls but does not have one or more of the Required Calls, the candidate must meet with the Medical Director, Program Coordinator and Lead Instructor to evaluate their competency.

Restricted Calls: During the Team Leader/Field Internship the following calls are restricted:
• No refusal of care/transport calls are accepted unless it involves ALS treatment and release.
• No inter-facility transfers are accepted unless the paramedic student is in charge of medications and or IV solutions without a non-EMS advanced health care professional on board.
The only situations with a patient dead at the scene that are accepted are Termination of Resuscitation calls where the paramedic student contacts Medical Co.

**Successful Completion of the Course**
In order to successfully complete the Parkland College Paramedic Course, the student must fulfill the following:
- Completion of all classroom and clinical requirements.
- Achieve an 80% average on all quizzes, homework, and exams.
- Satisfactory attendance (no more than 10 percent of the total scheduled hours missed for any reason).
- Satisfactory evaluation on clinical experiences.
- Satisfactory rating on all practical examinations.
- Satisfactory completion of Field Internship
- Maintain compliance with all the policies outlined for the EMT- Paramedic course.

**Guest Faculty Evaluations**
Whenever someone other than the EMS Lead Instructor teaches a class session, students may be asked to complete an evaluation of the guest faculty. *(See Appendix D)* This is true for both didactic and practical skill lab faculty. The evaluations are distributed and collected at the end of the course session. The evaluations are completed anonymously and placed in an envelope to be reviewed later. Evaluations are never read in front of the students.

The EMS Lead Instructor reviews the evaluations. A summary of the evaluations is kept in the course file in the Faculty Team office. A summary of the evaluations is shared with the guest faculty member. The Lead Instructor also reviews the evaluations and shares the information with the Medical Direction Team. The Guest Faculty Evaluation form is reviewed and revised as needed annually.

**Course Evaluations**
The Parkland Paramedic Program strives to provide the highest quality of EMS instruction possible. Course evaluations provide an opportunity for the Parkland Paramedic Program Faculty Team and Medical Direction Team to monitor the quality of EMS education, ensure the overall effectiveness of EMS education, and identify areas that need improvement as well as parts of the course that are outstanding. The course evaluations measure both the quality of the course content and the teaching effectiveness of the EMS Lead Instructor and other faculty.

This process is not intended to allow students to select Lead Instructors. It is expected that each student will evaluate the teaching ability of the instructor on a professional basis and not on a personal level. Should personality conflicts become apparent during the evaluation process, the Medical Direction Team shall review the matter with the individuals involved.

To enable all students to provide constructive criticism and feedback in a non-threatening manner, each EMS Lead Instructor will distribute a standard course evaluation prior to the completion of the course. The Evaluation should ideally be done during the last course session. The Evaluation forms contain a Likert scale format for evaluation of course structure with adequate space for personal comments. Evaluations of additional faculty and guest speakers are done immediately after that particular class session and are not part of the general course evaluation. The course evaluations are completed anonymously and placed in an envelope at the time of their completion. This sealed envelope is sent to the EMS Education Coordinator to be reviewed later. Evaluations are never read in front of the students.

The evaluations are reviewed and summarized by the Lead Instructor. A summary of the evaluations is kept with the course file in the Faculty office. The Lead Instructor shares the information from the evaluation forms with the Faculty Team and the Medical Direction Team. Modifications in the initial education course are made based on the feedback in the evaluations.

The Evaluation form is reviewed and revised as needed annually.
Appendix A

Parkland College Paramedic
Clinical Experience

Name: _______________________________ Date: __________

Time In: ______  Time Out: ________    Total Time:___________

Clinical Site: ___________________________________________________

Please use the following scale to rate the criteria below:

E= Exceeds Expectations    M= Meets Expectations
N=Needs Improvement    U = Unsatisfactory

_____ General appearance  _____ Handing confidential materials
_____ Attitude toward patients  _____ Attitude toward team members
_____ Reliability  _____ Initiative/Participation
_____ General attitude  _____ General call management
_____ Interaction with patients  _____ Recognizing need for treatment

Skills done:
Medications given: IV/IO ____ IM/SubQ ____ Oral____ Nebulized ____  IN ____

IV/IO sticks: _____    ET: ____________    BVM: ________ CPAP _______

# Assessments attached: ______________

Accomplishments during session:


Areas needing work:


Student comments:


________________________________________    __________________________
Preceptor                             Student
Appendix B
Professional Behavior Evaluation

Student Name:
Evaluator Name:
Date:

The categories in this tool identify professional behaviors described as desirable attributes of EMS medical professionals. The descriptions within each category represent the behaviors generally expected for the individual as an EMS student.

Each category will receive a score between 1 and 5. A score of 3 is considered average and represents the expected acceptable level of conduct for that category. Therefore overall scores are rated:

<table>
<thead>
<tr>
<th>Score Range</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>36-40 points</td>
<td>Outstanding</td>
</tr>
<tr>
<td>31-35 points</td>
<td>Meets Expectations</td>
</tr>
<tr>
<td>&lt; 25 points</td>
<td>Unacceptable</td>
</tr>
</tbody>
</table>

1. Integrity: Your recommended score: ______ Based on observations of classroom behaviors

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
</tbody>
</table>

Comments:

2. Empathy: Your recommended score: ______ Based on the level of maturity as demonstrated by behaviors in the classroom and comments made about others.

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
</tbody>
</table>

Comments:
3. Self Motivation: Your Recommended Score: ______  Based on timely completion of homework and clinical assignments.

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Consistently failing to meet established deadlines, unable to demonstrate intrinsic motivating factors requiring extra extrinsic motivation from instructors, failing to improve even after corrective feedback has been provided by faculty, requiring constant supervision to complete tasks or being asked to repeat a task that is incorrectly performed.</td>
</tr>
<tr>
<td>2 Failing to meet 1-3 tasks as described in #3 but obviously making attempts to attain acceptable standards.</td>
</tr>
<tr>
<td>3 Taking initiative to complete assignments, taking initiative to improve or correct behavior, taking on and following through on tasks without constant supervision, showing enthusiasm for learning and improvement, consistently striving for improvement in all aspects of patient care and professional activities, accepting constructive criticism in a positive manner, taking advantage of learning opportunities.</td>
</tr>
<tr>
<td>4 Occasionally completing and turning in assignments before the scheduled deadline, volunteering for additional duties, consistently striving for excellence in all aspects of patient care and professional activities, seeking out a mentor or faculty member to provide constructive criticism, informing faculty of learning opportunities.</td>
</tr>
<tr>
<td>5 Never missing a deadline and often completing assignments well ahead of deadlines, reminding other students of deadlines, supporting faculty in upholding the rules and regulations of the program, taking seriously opportunities to provide feedback to fellow students, seeking opportunities to obtain feedback, assisting faculty in arranging and coordinating activities.</td>
</tr>
</tbody>
</table>

Comments:

4. Appearance and Personal Hygiene: Your Recommended Score: ______

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Inappropriate uniform or clothing worn to class or clinical settings. Poor hygiene or grooming.</td>
</tr>
<tr>
<td>2 Appropriate clothing or uniform is selected for a majority of the time, but the uniform may be unkempt (wrinkled), mildly soiled, or in need of minor repairs, appropriate personal hygiene is common, but occasionally the individual is unkempt or disheveled.</td>
</tr>
<tr>
<td>3 Clothing and uniform is appropriate, neat, clean and well-maintained, good personal hygiene and grooming.</td>
</tr>
<tr>
<td>4 Clothing and uniform are above average. Uniform is pressed and business casual is chosen when uniform is not worn. Grooming and hygiene is good or above average.</td>
</tr>
<tr>
<td>5 Uniform is always above average. Non-uniform clothing is business-like. Grooming and hygiene is impeccable. Hair is worn in an appropriate manner for the environment and student is free of excessive jewelry. Make-up and perfume or cologne usage is discrete and tasteful.</td>
</tr>
</tbody>
</table>

Comments:
5. Self Confidence: Your Recommended Score: _____ Based on responses in class and practical lab settings.

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does not trust personal judgment, is unaware of strengths or weaknesses, and frequently exercises poor personal judgment.</td>
</tr>
<tr>
<td>2. Needs encouragement before not trusting personal judgment, is aware of strengths but does not readily recognize weaknesses, sometimes makes poor personal choices.</td>
</tr>
<tr>
<td>3. Demonstrating the ability to trust personal judgment, demonstrating an awareness of strengths and limitations, exercises good personal judgment.</td>
</tr>
<tr>
<td>4. Stands by his/her choices when challenged by an authority figure, aware of strengths and weaknesses and seeks to improve, exercises good personal judgment and often serves as a mentor for classmates.</td>
</tr>
<tr>
<td>5. Stands by and can defend personal choices when challenged by an authority figure, actively seeks to improve on weaknesses, seeks out opportunities to assist other classmates in developing their self-confidence.</td>
</tr>
</tbody>
</table>

Comments:

6. Communications: Your Recommended Score: _____

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Unable to speak or write clearly and is unable to correct their behavior despite intervention by instructors, does not actively listen (requires instructions to be repeated or appears unable to follow directions,) resistant to learning new communications strategies.</td>
</tr>
<tr>
<td>2. Needs work to speak or write clearly, knows how to actively listen although sometimes is unable to model good listening skills, able to identify alternative communication strategies needed in various situations but is still developing the skill to perform alternative strategies.</td>
</tr>
<tr>
<td>3. Speaking clearly, writing legibly, listening actively, and adjusting communications strategies to various situations.</td>
</tr>
<tr>
<td>4. Working on improving speaking and writing abilities, models active listening skills, able to modify communication strategies easily in various situations and able to effectively communicate a message in these various settings.</td>
</tr>
<tr>
<td>5. Working on self and assisting classmates in improving speaking and writing abilities, models and is able to demonstrate active listening techniques to other students, is comfortable utilizing a variety of communication styles, may have proficiency in another language, including sign language.</td>
</tr>
</tbody>
</table>

Comments:
### 7. Time Management: Your Recommended Score: _____ Based on your attendance at class and clinical.

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
</tr>
<tr>
<td><strong>2</strong></td>
</tr>
<tr>
<td><strong>3</strong></td>
</tr>
<tr>
<td><strong>4</strong></td>
</tr>
<tr>
<td><strong>5</strong></td>
</tr>
</tbody>
</table>

Comments:

### 8. Teamwork and Diplomacy: Your recommended Score: _____ Based on observation of classroom activities.

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
</tr>
<tr>
<td><strong>2</strong></td>
</tr>
<tr>
<td><strong>3</strong></td>
</tr>
<tr>
<td><strong>4</strong></td>
</tr>
<tr>
<td><strong>5</strong></td>
</tr>
</tbody>
</table>

Comments:
9. Respect: Your Recommended Score: _ _____ Based on observation of behaviors demonstrated in the classroom and the college setting

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Disrespect of authority, being argumentative, using inappropriate words or outbursts of anger, deliberately undermining authority in words or actions or trying to provoke others, frequently unable to act in a professional manner.</td>
</tr>
<tr>
<td>2. Being polite when required, occasionally overheard using demeaning or derogatory language but confining it to situations other than in patient care settings, occasionally acting unprofessional on the job.</td>
</tr>
<tr>
<td>3. Being polite to others, not using derogatory or demeaning terms, and behaving in a manner that brings credit to the profession.</td>
</tr>
<tr>
<td>4. Being polite even when a situation is not going in his/her favor, always using respectful language when describing situations even when not in public areas, modeling good professional behaviors.</td>
</tr>
<tr>
<td>5. Serving as a “peacemaker” in volatile situations, able to take abusive language or disrespect from patients without reacting negatively towards the individual, modeling good professional behaviors even when outside of the classroom or off of the job.</td>
</tr>
</tbody>
</table>

Comments:

10. Patient Advocacy: Your Recommended Score: _______ Based on comments made during class discussions.

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Unable to deal with patients because of personal biases, actively demeaning or degrading patients with words or deeds, unconcerned about patient rights, feelings or considerations, frequently takes shortcuts during care of patients because it is “easier” or “faster.”</td>
</tr>
<tr>
<td>2. Occasionally has difficulty dealing with patients because of personal bias or feelings, not always able to place the needs of the patient first,</td>
</tr>
<tr>
<td>3. Not allowing personal bias or feelings to interfere with patient care, placing the needs of patients above self-interest, protecting and respecting patient confidentiality and dignity.</td>
</tr>
<tr>
<td>4. Not allowing personal bias or feelings to interfere with patient care despite strong negative feelings or biases towards a patient or situation, actively advocating for patient rights, protecting confidentiality.</td>
</tr>
<tr>
<td>5. Models patient advocacy and able to defend the need to advocate for patient rights, seeks out opportunities to help fellow classmates learn the principles of patient advocacy, when the opportunity presents itself can be called upon to follow through on an advocacy issue even if it means it on their off time.</td>
</tr>
</tbody>
</table>

Comments:
11. Careful Delivery of Services: Your Recommended Score: _____ Based on the scores achieved on quizzes, homework, and tests and performance in practical labs

<table>
<thead>
<tr>
<th>Required attributes to obtain the recommended score:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Unable to perform skills at entry level or requiring constant monitoring or reinforcement to perform skills, required to recheck tasks because of omissions or inaccuracies in performance or documentation, unwilling to learn policies, procedures or protocols, deliberate unwillingness to follow the letter or spirit of rules or regulations.</td>
</tr>
<tr>
<td>2. Occasionally performing skills below the entry-level, requiring monitoring to ensure completeness and accuracy in completing tasks, occasional minor breeches in policies, procedures or protocols attributed to lack of knowledge of same but willing to learn, may follow the letter of, but not always the spirit, of rules and regulations.</td>
</tr>
<tr>
<td>3. Performing skills at an entry-level capacity a majority of the time, performing complete equipment and supply checks, demonstrating careful and safe ambulance operations, following policies and procedures and protocols, following orders.</td>
</tr>
<tr>
<td>4. Can be trusted to function independent of all but minor supervision, does not need to be reminded to perform routine maintenance checks, and follows the letter and spirit of all rules, regulations, policies and procedures.</td>
</tr>
<tr>
<td>5. Functions independently and able to correct mistakes by self-reflection, able to assist in the development of rules, regulations, policies and procedures, will assist in monitoring fellow students in the completion of tasks and may be able to assist fellow students identify weaknesses and strengths.</td>
</tr>
</tbody>
</table>

Comments:

General Comments:

Quizzes and Homework: _______ Tests: _______ Average: __________

Clinical completed and on file: (see attached)

Student Signature __________________ Printed Name __________________ Date __________________

Instructor Signature __________________ Printed Name __________________ Date __________________

Student should sign form only if conference is held following evaluation. Student agreement of ratings is not required for form to be completed and forms may be completed anonymously.
## Appendix C

Parkland Paramedic Program  
Field Evaluation Form

Student: ___________________________________________  Date: ___ / ___ / ______

### Patient Assessment Skills

#### Scene Size-up

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviews dispatch information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Determines Scene Survey</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selects appropriate BSI</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Considers MOI or NOI</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Determines need for additional resources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Instructs ancillary personnel as needed</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Primary Survey (Trauma Patient)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performs the following Initial systematic assessment (&lt; 90 sec.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assess patient LOC (AVPU)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assess patients airway and corrects life threatening conditions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assess patient breathing (rate and quality) Corrects life threatening conditions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assess circulation corrects any life threatening conditions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acknowledges patients chief complaint</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identifies “Load and Go” transport ready in 10 minutes or less</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Secondary Survey (Trauma Patient)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obtains patients medical history</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vital Signs (pulse, respiration, B/P, monitor)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total body survey conducted in systematic order</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identifies and treats minor wounds and fractures</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Medical Patient

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performs initial assessment and critical care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acknowledges the patients chief complaint</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obtains patients past medication and medical history</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Performs on-going assessment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scene time: 20 minutes or less</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Patient Treatment Skills

### Airway Management

<table>
<thead>
<tr>
<th>Task</th>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Selects Proper Delivery of oxygen</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selects the appropriate airway</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proficiently uses the airway</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Confirms the proper placement of airway</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reassess patient and monitors (pulse ox)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Fluid Therapy

<table>
<thead>
<tr>
<th>Task</th>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Selects appropriate fluid, check clarity expiration date and</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selects appropriate tubing and flushes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selects proper catheter and properly performs venipuncture</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ensures good placement and secures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disposes of needle properly</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Medication

<table>
<thead>
<tr>
<th>Task</th>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checks for patient allergies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selects correct medication</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knows correct dosage and route</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Observes patient for desired and adverse effect</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disposes of needle properly</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Cardiology

<table>
<thead>
<tr>
<th>Task</th>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interprets rhythm(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selects appropriate treatment Protocol</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knows energy levels and delivery methods according to protocol</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Preceptor comments:

### Overall Rating:

1 – Inadequate
2 – Adequate/needs assistance
3 – Competent
4 – Excellent

### Preceptor Signature: ________________________________
## Appendix D

Parkland College Paramedic Program  
**Guest Faculty Evaluation**

Session Title: ___________________________ Date: ______________

Faculty: ___________________________ Lead Instructor: ______________

By using the following code please rate the guest faculty member:

5 = excellent  
4 = above average  
3 = average  
2 = below average  
1 = poor  
N/A = non applicable

<table>
<thead>
<tr>
<th>Knowledge of the subject matter:</th>
<th>5</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incorporation of AV Materials:</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>N/A</td>
</tr>
<tr>
<td>Quality of handouts:</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>N/A</td>
</tr>
<tr>
<td>Teaching Methods Used:</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>N/A</td>
</tr>
<tr>
<td>Receptive to student questions:</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Comments:

What do you feel would have made this session more effective?
Appendix E

Parkland Paramedic Program
Education Policies
Signature Sheet

By signing below, I verify that I am above the age of 18 and have read and understand the Parkland Paramedic Program Education Policies for this course.

I also verify the following:

- I have completed high school, as evidenced by a high school diploma or G.E.D.
- I have a current EMT-Basic or EMT-Intermediate license.
- I have current CPR certification.
- I have completed all program pre-requisites

I understand that failure to comply with policies including the grading scale and attendance requirements may result in corrective action, which could include dismissal from the course and denial of my ability to take the State of Illinois Licensure Examination. I agree to abide by all of the policies of the course.

__________________________________________  ______________________
Student Signature                                 Date

______________________________________________
Printed Name
I understand that in the process of learning ALS skills required of paramedics, that certain invasive interventions must be practiced and mastered. To that end, I understand that there will be practical labs in which I will perform peripheral venous access using an IV catheter on manikins; one or more of my classmates and that one or more fellow students will perform peripheral venous access on me. All venous access attempts will be performed under the direct supervision of a qualified preceptor and student will use new, sterile equipment and aseptic technique, thus minimizing the risk of complications.

Further, there will be labs in which I will perform intramuscular (IM) injections or subcutaneous (Sub Q) on one or more of my classmates and that one or more of my fellow students will perform IM injections on me under the direct supervision of a qualified preceptor. Students will use sterile equipment in these labs and aseptic technique.

I understand that a licensed RN or EMT-Paramedic preceptor will supervise each invasive skill with sufficient ability that they would be considered competent to both perform the skill and teach it to others.

I further understand that mastery of each of these skills is a requirement for EMT-Paramedic course completion and consent to participating in these labs as specified above.

__________________________________         ________________________
Student Signature                                  Date

_______________________________________________
Printed Name