**Valencia College**

**Department of Emergency Medical Services**



**Paramedic I Skills Laboratory**

# VALENCIA COLLEGE

# PARAMEDIC I – SKILLS LABORATORY

EMS 2603L (2 credits / 6 contacts)

Fall Term; August – December 2017

CRNs: 10016, 10017, 15040

# SIMULATION LAB COORDINATOR:

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Office Hours: Posted during the first week of class.

Student conferences are conducted by appointment.

# SENIOR INSTRUCTIONAL LAB ASSISTANT:

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# LABORATORY SESSIONS (LOCATION AND TIMES):

Location: Building 3, Room: 246, 246A, 246B

|  |  |  |
| --- | --- | --- |
| Times: | Monday | 11:00 am – 5:00 pm |
|  | Tuesday | 1:00 pm – 7:00 pm |
|  | Wednesday | 11:00 am – 5:00 pm |

\*Times are by appointment only – per FISDAP

\*Additional lab hours will be required for students identified as having difficulty with particular areas.

# **INSTRUCTIONAL METHODOLOGY:**

1. Return demonstration utilizing psychomotor and cognitive skills
2. Didactic lectures utilizing PowerPoint and videos
3. Blackboard platform containing tutorial videos and discussion forums

# **COURSE DESCRIPTION:**

# This course is designed to reinforce concepts and clinical skills learned at the EMT level and to integrate this knowledge with beginning advanced life support concepts and skills. The skills laboratory exercises include a review of EMT skills, patient assessments, airway management, veni-puncture/intravenous therapy, and pharmacology administration skills and techniques. This course includes Module 1, 2 and 3 of the DOT National Standard Curriculum for Paramedic Programs.

# **PROGRAM GOALS:**

1. To provide students with the psychomotor and cognitive skills necessary to become competent entry-level paramedics.
2. To develop and foster behaviors attributes, and attitudes of a professional in the field of emergency care.

# **COREQUISITES**:

# EMS 2603, EMS 2666L and EMS 1010. All courses must be completed with a C (80%) or better. If a student is unsuccessful in any of the co-requisite components, he/she will be withdrawn from all advanced paramedic courses.

# **EDUCATIONAL MATERIALS:**

1. Paramedic I Lab Manual, Hezedean A. Smith, 2014.

2. Paramedic Care: Principles and Practice, Volume 1, Bledsoe, Porter, and Cherry, 5th Edition.

3. Paramedic Care: Principles and Practice, Volume 2, Bledsoe, Porter, and Cherry, Brady 5th Edition.

4. BLS for Healthcare Provider, American Heart Association, (current edition).

5. ITLS Provider, Brady Publishing, (current edition).

6. Simulation Treatment Guidelines, Hezedean A. Smith (electronic copy provided), 2014.

# **REFUND OF FEES:**

# Students are eligible for a refund of fees if they withdraw by September 5, 2017. The following is a link to the college’s academic calendar: <http://valenciacollege.edu/businessoffice/important-deadlines.cfm>

# **SPECIAL CONSIDERATIONS AND REGULATIONS:**

1. Disabled Students: In compliance with the Federal Americans with Disabilities

Act, attempts will be made to accommodate students with disabilities. Students

with disabilities who qualify for academic accommodations must provide a letter

from the Office for Students with Disabilities (OSD) and discuss specific needs

with the professor, preferably during the first two-weeks of class. The Office for

Students with Disabilities determines accommodations based on appropriate

documentation of disabilities.

2. Per Valencia Policy 4-07 (Academic Progress, Course Attendance and Grades,

and Withdrawals), a student who withdraws from class before the established

deadline for a particular term will receive a grade of “W.” A student is not

permitted to withdraw after the withdrawal deadline. **The withdrawal deadline is November 10, 2017**. A faculty member MAY withdraw a student up to the beginning of the final exam period for violation of the class attendance policy. A student who is withdrawn by faculty for violation of the class attendance policy will receive a grade of “W.” Any student who withdraws or is withdrawn from a class during a third or subsequent attempt in the same course will be assigned a grade of “F.” For a complete policy and procedure overview on Valencia Policy 4-07 please go to:

<http://valenciacollege.edu/generalcounsel/policy/default.cfm?policyID=75&volumeID_1=4&navst=0>

3. Readmission to the Paramedic Program: Any student who withdraws from, or

fails any co-requisite components will be required to complete a new application packet, and formally apply for readmission to the Paramedic Program. Students who withdraw from or fail paramedic courses are not granted automatic readmission to the program in subsequent semesters.

# **LEARNING OBJECTIVES:**

1. Demonstrate safe methods for lifting and moving patients in emergency and

non-emergency situations.

2. Demonstrate the proper procedures to take for personal protection from disease.

3. Demonstrate the use of protective equipment appropriate to the environment and

scene.

4. Use universal precautions and body substance isolation (BSI) procedures during

medication administration.

5. Demonstrate cannulation of peripheral or external jugular veins.

6. Demonstrate clean technique during medication administration.

7. Demonstrate administration of oral medications.

8. Demonstrate administration of medications by the inhalation route.

9. Demonstrate administration of medications by the gastric tube.

10. Demonstrate rectal administration of medications.

11. Demonstrate preparation and administration of parenteral medications.

12. Demonstrate preparation and techniques for obtaining a blood sample. Perfect

disposal of contaminated items and sharps.

13. Perform body substance isolation (BSI) procedures during basic airway

management, advanced airway management, and ventilation.

14. Perform pulse oximetry.

15. Perform end-tidal CO2 detection.

16. Perform manual airway maneuvers, including:

a. Opening the mouth

b. Head-tilt/ chin-lift maneuver

c. Jaw-thrust without head-tilt maneuver

d. Modified jaw-thrust maneuver

17. Perform manual airway maneuvers for pediatric patients, including:

a. Opening the mouth

b. Head-tilt/ chin-lift maneuver

c. Jaw-thrust without head-tilt maneuver

d. Modified jaw-thrust maneuver

18. Perform the Sellick’s maneuver (cricoid pressure).

19. Perform complete airway obstruction maneuvers, including:

a. Heimlich maneuver

b. Finger sweep

c. Chest thrusts

d. Removal with Magill forceps

20. Demonstrate suctioning the upper airway by selecting a suction device, catheter and

technique.

21. Perform tracheobronchial suctioning in the intubated patient by selecting a

suction device, catheter and technique.

22. Demonstrate insertion of a nasogastric tube.

23. Demonstrate insertion of an orogastric tube.

24. Perform gastric decompression by selecting a suction device, catheter and technique.

25. Demonstrate insertion of an oropharyngeal airway.

26. Demonstrate insertion of a nasopharyngeal airway.

27. Demonstrate ventilating a patient by the following techniques:

a. Mouth-to-mask ventilation

b. One person bag-valve-mask

c. Two-person bag-valve-mask

d. Three person bag-valve-mask

e. Flow-restricted, oxygen-powered ventilation device

f. Automatic transport ventilator

g. Mouth-to-stoma

h. Bag-valve-mask-to-stoma ventilation

28. Perform ventilation with a bag-valve-mask with an in-line small-volume nebulizer.

29. Perform oxygen delivery from a cylinder and regulator with an oxygen delivery device.

30. Perform oxygen delivery with an oxygen humidifier.

31. Deliver supplemental oxygen to a breathing patient using the following devices:

nasal cannula, simple facemask, partial rebreather mask, non-rebreather mask, and

venturi mask

32. Perform retrieval of foreign bodies from the upper airway.

33. Perform assessment to confirm correct placement of the endotracheal tube.

34. Intubate the trachea by the following methods:

a. Orotracheal Intubation

b. Nasotracheal Intubation

35. Adequately secure an endotracheal tube.

36. Perform extubation.

# **HISTORY TAKING**

1. Demonstrate the techniques of history taking.

2. Demonstrate the importance of using open-ended questions.

3. Demonstrate the use of facilitation, reflection, clarification, empathetic responses,

confrontation, and interpretation.

4. Differentiate between facilitation, reflection, clarification, sympathetic responses,

confrontation, and interpretation.

5. Demonstrate the structure and purpose of a health history.

6. Demonstrate how to obtain a comprehensive health history.

7. Demonstrate components of a comprehensive history of an adult patient.

# **TECHNIQUES OF PHYSICAL EXAMINATION**

1. Demonstrate the skills that involve inspection, palpation, percussion, and auscultation.

2. Demonstrate the techniques of inspection, palpation, percussion, and auscultation.

3. Demonstrate the evaluation of mental status.

4. Demonstrate the importance of a general survey.

5. Demonstrate the examination of skin, hair and nails.

6. Demonstrate an understanding of normal and abnormal findings of the assessment of the

skin.

7. Demonstrate an understanding of abnormal findings of the assessment of the skin.

8. Demonstrate the examination of the head and neck.

9. Differentiate normal and abnormal findings of the scalp examination.

10. Describe the normal and abnormal assessment findings of the skull.

11. Demonstrate the assessment of visual acuity.

12. Demonstrate the examination of the eyes.

13. Distinguish between normal and abnormal assessment findings of the eyes.

14. Demonstrate the examination of the ears.

15. Differentiate normal and abnormal assessment findings of the ears.

16. Demonstrate the examination of the nose.

17. Differentiate normal and abnormal assessment findings of the nose.

18. Demonstrate the examination of the mouth and pharynx.

19. Differentiate normal and abnormal assessment findings of the mouth and pharynx.

20. Demonstrate the examination of the neck.

21. Differentiate normal and abnormal assessment findings the neck.

22. Demonstrate the survey of the thorax and respiration.

23. Demonstrate the examination of the posterior chest.

24. Demonstrate percussion of the chest.

25. Differentiate the percussion notes and their characteristics.

26. Differentiate the characteristics of breath sounds.

27. Demonstrate the examination of the anterior chest.

28. Differentiate normal and abnormal assessment findings of the chest examination.

29. Demonstrate special examination techniques related to the assessment of the chest.

30. Demonstrate the examination of the arterial pulse including rate, rhythm, and amplitude.

31. Distinguish normal and abnormal findings of arterial pulse.

32. Demonstrate the assessment of jugular venous pressure and pulsations.

33. Distinguish normal and abnormal examination findings of jugular venous pressure and

pulsations.

34. Demonstrate the examination of the heart and blood vessels.

35. Differentiate normal and abnormal assessment findings of the heart and blood vessels.

36. Demonstrate the auscultation of the heart.

37. Differentiate the characteristics of normal and abnormal findings associated with the

auscultation of the heart.

38. Demonstrate special examination techniques of the cardiovascular examination.

39. Demonstrate the examination of the abdomen.

40. Differentiate normal and abnormal assessment findings of the abdomen.

41. Demonstrate auscultation of the abdomen.

42. Distinguish normal and abnormal findings of the auscultation of the abdomen.

43. Demonstrate the examination of the female genitalia.

44. Differentiate normal and abnormal assessment findings of the female genitalia.

45. Demonstrate the examination of the male genitalia.

46. Differentiate normal and abnormal findings of the male genitalia.

47. Describe the examination of the anus and rectum.

48. Distinguish between normal and abnormal findings of the anus and rectum.

49. Demonstrate the examination of the peripheral vascular system.

50. Differentiate normal and abnormal findings of the peripheral vascular system.

51. Demonstrate the examination of the musculoskeletal system.

52. Differentiate normal and abnormal findings of the musculoskeletal system.

53. Demonstrate the examination of the nervous system.

54. Differentiate normal and abnormal findings of the nervous system.

55. Demonstrate the assessment of the cranial nerves.

56. Differentiate normal and abnormal findings of the cranial nerves.

57. Demonstrate the general guidelines of recording examination information.

58. Discuss the considerations of examination of an infant or child.

# **PATIENT ASSESSMENT**

1. Recognize hazards/ potential hazards.

2. Describe common hazards found at the scene of a trauma and a medical patient.

3. Determine hazards found at the scene of a medical or trauma patient.

4. Differentiate safe from unsafe scenes.

5. Demonstrate methods to making an unsafe scene safe.

6. Discuss common mechanisms of injury/ nature of illness.

7. Predict patterns of injury based on mechanism of injury.

8. Discuss the reason for identifying the total number of patients at the scene.

9. Organize the management of a scene following size-up.

10. Explain the reasons for identifying the need for additional help or assistance.

11. Summarize the reasons for forming a general impression of the patient.

12. Discuss methods of assessing mental status.

13. Demonstrate categorization levels of consciousness in the adult, infant and child.

14. Differentiate between assessing the altered mental status in the adult, child and infant patient.

15. Demonstrate methods of assessing the airway in the adult, child and infant patient.

16. Demonstrate appropriate management of the cervical spine once the patient has been determined to be a trauma patient.

17. Analyze a scene to determine if spinal precautions are required.

18. Demonstrate methods used for assessing if a patient is breathing.

19. Differentiate between a patient with adequate and inadequate minute ventilation.

20. Demonstrate the various methods of assessing breathing in the adult, child and infant patient.

21. Compare the methods of providing airway care to the adult, child and infant patient.

22. Demonstrate the methods used to locate and assess a pulse.

23. Differentiate between locating and assessing a pulse in an adult, child and infant patient.

24. Discuss the need for assessing the patient for external bleeding.

25. Describe normal and abnormal findings when assessing skin color.

26. Describe normal and abnormal findings when assessing skin temperature.

27. Describe normal and abnormal findings when assessing skin condition.

28. Explain the reason for prioritizing a patient for care and transport.

29. Demonstrate the components specific to patients who require expeditious transport.

30. Demonstrate the evaluation of patient’s perfusion status based on findings in the initial

assessment.

31. Demonstrate the use of orthostatic vital signs and evaluate their usefulness in assessing

a patient in shock.

32. Demonstrate the techniques of physical examination to the medical patient.

33. Differentiate between the assessment that is performed for a patient who is

unresponsive or has an altered mental status and other medical patients requiring

assessment.

34. Discuss the reasons for reconsidering the mechanism of injury.

35. Demonstrate a rapid trauma assessment.

36. Recite examples and explain why patients should receive a rapid trauma assessment.

37. Demonstrate techniques of physical examination to the trauma patient.

37. Describe the areas included in the rapid trauma assessment and discuss what should be

evaluated.

39. Differentiate cases when the rapid assessment may be altered in order to provide patient care.

40. Discuss the reason for performing a focused history and physical exam.

41. Describe when and why a detailed physical examination is necessary.

42. Demonstrate the components of the detailed physical exam in relation to the

techniques of examination.

43. Demonstrate which areas of the body are evaluated during the detailed physical exam.

44. Demonstrate what additional care should be provided while performing the detailed physical

exam.

45. Distinguish between the detailed physical exam that is performed on a trauma patient and

that of the medical patient.

46. Differentiate patients requiring a detailed physical exam from those who do not.

47. Demonstrate the initial assessment as part of the on-going assessment.

48. Demonstrate the components of the on-going assessment.

49. Demonstrate trending of assessment components.

50. Discuss medical identification devices/ systems.

# **COMMUNICATIONS**

1. Demonstrate the importance of communications when providing EMS.

2. Identify the role of verbal, written, and electronic communications in the provision of EMS.

3. Describe the phases of communications necessary to complete a typical EMS event.

4. Demonstrate the importance of proper terminology when communicating during an EMS

event.

5. Identify the importance of proper verbal communications during an EMS event.

6. List factors that impede effective verbal communications.

7. List factors that enhance verbal communications.

8. Demonstrate importance of proper written communications during an EMS event.

9. List factors that impede effective written communications.

10. List factors that enhance written communications.

11. Recognize the legal status of written communications related to an EMS event.

12. State the importance of data collection during an EMS event.

13. Demonstrate the use of technology used to collect and exchange patient and/or scene

information electronically.

14. Recognize the legal status of patient medical information exchanged electronically.

15. Identify the components of the local EMS communications system and describe their

function and use.

16. Identify and differentiate among the following communications systems (EMS 2603):

a. Simplex

b. Multiplex

c. Duplex

d. Trunked

e. Digital communications

f. Cellular telephone

g. Facsimile

h. Computer

17. Demonstrate an understanding of patient assessment information in the correct order

for electronic transmission to medical direction according to the format used locally.

# **DOCUMENTATION**

1. Demonstrate the general principles regarding the importance of EMS documentation

and ways in which documents are used.

2. Demonstrate and use medical terminology correctly.

3. Demonstrate an understanding of appropriate and accurate medical abbreviations and

acronyms.

4. Record all pertinent administrative information.

5. Explain the role of documentation in agency reimbursement.

6. Analyze the documentation for accuracy and completeness, including spelling.

7. Identify and eliminate extraneous or nonprofessional information.

8. Demonstrate an understanding of the differences between subjective and objective

elements of documentation.

9. Evaluate a finished document for errors and omissions.

10. Evaluate a finished document for proper use and spelling of abbreviations and acronyms.

11. Evaluate the confidential nature of an EMS report.

12. Describe the potential consequences of illegible, incomplete, or inaccurate documentation.

13. Describe the special considerations concerning patient refusal of transport.

14. Record pertinent information using a consistent narrative format.

15. Explain how to properly record direct patient or bystander comments.

16. Describe the special considerations concerning mass casualty incident documentation.

17. Apply the principles of documentation to computer charting, as access to this

technology becomes available.

18. Identify and record the pertinent, reportable clinical data of each patient simulation

interaction.

19. Note and record “pertinent negative” clinical findings.

20. Correct errors and omissions, using proper procedures as defined under local protocol.

21. Assume responsibility for self-assessment of all documentation.

22. Demonstrate proper completion of an EMS event record used locally (FISDAP).

# **PHARMACOLOGY**

1. Describe historical trends in pharmacology.

2. Differentiate among the chemical, generic (nonproprietary), and trade (proprietary) names of

a drug.

3. List the four main sources of drug products.

4. Demonstrate an understanding how drugs are classified.

5. Demonstrate an understanding of special consideration in drug treatment with regard

to pregnant, pediatric and geriatric patients.

6. Demonstrate an understanding of the paramedic's responsibilities and scope of

management pertinent to the administration of medications.

7. Demonstrate an understanding of the specific anatomy and physiology pertinent to

pharmacology with additional attention to autonomic pharmacology.

8. Demonstrate an understanding of general properties of drugs.

9. Demonstrate an understanding of liquid and solid drug forms.

10. Demonstrate an understanding of routes of drug administration.

11. Demonstrate an understanding of enteral and parenteral routes of drug administration.

12. Demonstrate an understanding of mechanisms of drug action.

13. Demonstrate an understanding of the phases of drug activity, including the

pharmaceutical, pharmacokinetic, and pharmacodynamic phases.

14. Demonstrate an understanding of drug interactions.

15. Demonstrate an understanding of considerations for storing and securing medications.

16. Demonstrate an understanding of drugs that the paramedic may administer according to local

protocol.

17. Demonstrate an understanding of integration of pathophysiological principles of

pharmacology with patient assessment.

18. Demonstrate an understanding of how to synthesize patient history information and

assessment findings to form a field impression.

19. Demonstrate an understanding of how to synthesize a field impression to implement a

pharmacologic management plan.

# **VENOUS ACCESS AND MEDICATION ADMINISTRATION**

1. Demonstrate an understanding of the specific anatomy and physiology pertinent to

medication administration.

2. Demonstrate an understanding of mathematical principles.

3. Demonstrate an understanding of mathematical equivalents.

4. Demonstrate an understanding of temperature readings between the Centigrade and

Fahrenheit scales.

5. Demonstrate an understanding of formulas as a basis for performing drug calculations.

6. Demonstrate an understanding of how to apply basic principles of mathematics to the

calculation of problems associated with medication dosages.

7. Demonstrate an understanding of how to perform mathematical conversions from the

household system to the metric system.

8. Demonstrate an understanding of the indications, equipment needed, technique used,

precautions, and general principles of peripheral venous or external jugular cannulation.

9. Demonstrate an understanding of the indications, equipment needed, technique used,

precautions, and general principles of intraosseous needle placement and infusion.

10. Demonstrate an understanding of legal aspects affecting medication administration.

11. Demonstrate an understanding of the "six rights" of drug administration and correlate

these with the principles of medication administration.

12. Demonstrate an understanding of medical asepsis and the differences between clean

and sterile techniques.

13. Demonstrate the use of antiseptics and disinfectants.

14. Demonstrate the use of universal precautions and body substance isolation (BSI)

procedures when administering a medication.

15. Demonstrate an understanding of how to differentiate among the different dosage

forms of oral medications.

16. Demonstrate the use of equipment needed and general principles of administering oral

medications.

17. Demonstrate an understanding of the indications, equipment needed, techniques used,

precautions, and general principles of administering medications by the inhalation route.

18. Demonstrate an understanding of the indications, equipment needed, techniques used,

precautions, and general principles of administering medications by the gastric tube.

19. Demonstrate an understanding of the indications, equipment needed, techniques used,

precautions, and general principles of rectal medication administration.

20. Demonstrate an understanding of how to differentiate among the different

parenteral routes of medication administration.

21. Demonstrate how to use the equipment needed, techniques used, complications, and general

principles for the preparation and administration of parenteral medications.

22. Demonstrate an understanding of how to differentiate among the different

percutaneous routes of medication administration.

23. Demonstrate an understanding of the purpose, equipment needed, techniques used,

complications, and general principles for obtaining a blood sample.

24. Demonstrate appropriate disposal of contaminated items and sharps.

25. Demonstrate an understanding of how to synthesize a pharmacologic management

plan including medication administration.

26. Demonstrate an understanding of how to integrate pathophysiological principles of

medication administration with patient management.

# **AIRWAY MANAGEMENT AND VENTILATION**

1. Demonstrate an understanding of the primary objective of airway maintenance.

2. Identify commonly neglected prehospital skills related to airway.

3. Identify the anatomy of the upper and lower airway.

4. Describe the functions of the upper and lower airway.

5. Explain the differences between adult and pediatric airway anatomy.

6. Define gag reflex.

7. Demonstrate an understanding of the relationship between pulmonary circulation and

respiration.

8. Demonstrate an understanding of the concentration of gases that comprise atmospheric air.

9. Demonstrate an understanding of the measurement of oxygen in the blood.

10. Demonstrate an understanding of the measurement of carbon dioxide in the blood.

11. Describe peak expiratory flow.

12. Demonstrate an understanding of factors that cause decreased oxygen concentrations in the

blood.

13. Demonstrate an understanding of the factors that increase and decrease carbon dioxide

production in the body.

14. Define atelectasis.

15. Define FiO2.

16. Demonstrate an understanding of how to differentiate between hypoxia and hypoxemia.

17. Demonstrate an understanding of the voluntary and involuntary regulation of respiration.

18. Demonstrate an understanding of the modified forms of respiration.

19. Demonstrate an understanding of normal respiratory rates and tidal volumes for the

adult, child, and infant.

20. Demonstrate an understanding of the factors that affect respiratory rate and depth.

21. Explain the risk of infection to EMS providers associated with ventilation.

22. Demonstrate an understanding of pulsus paradoxes.

23. Demonstrate an understanding of and explain the implications of partial airway

obstruction with good and poor air exchange.

24. Demonstrate appropriate management of a complete airway obstruction.

25. Demonstrate an understanding of the causes of upper airway obstruction.

26. Demonstrate an understanding of causes of respiratory distress.

27. Demonstrate application of manual airway maneuvers.

28. Demonstrate application of the Sellick (cricoid pressure) maneuver.

29. Describe complete airway obstruction maneuvers.

30. Explain the purpose for suctioning the upper airway.

31. Identify types of suction equipment.

32. Describe the indications for suctioning the upper airway.

33. Demonstrate the use of the various types of suction catheters, including hard or rigid

catheters and soft catheters.

34. Demonstrate the techniques of suctioning the upper airway.

35. Identify special considerations of suctioning the upper airway.

36. Describe the indications, contraindications, advantages, disadvantages, complications,

equipment and technique of tracheobronchial suctioning in the intubated patient.

37. Demonstrate the use of an oral and nasal airway.

38. Identify and demonstrate special considerations of tracheobronchial suctioning in the

intubated patient.

39. Demonstrate an understanding of gastric distention.

40. Describe the indications, contraindications, advantages, disadvantages, complications,

equipment and technique for inserting a nasogastric tube and orogastric tube.

41. Identify special considerations of gastric decompression.

42. Describe the indications, contraindications, advantages, disadvantages, complications,

and technique for inserting an oropharyngeal and nasopharyngeal airway

43. Demonstrate the following skills in addition to describing the indications,

contraindications, advantages, disadvantages, complications, and technique for

ventilating a patient by:

a. Mouth-to-nose

b. Mouth-to-mask

c. One person bag-valve-mask

d. Two person bag-valve-mask

e. Three person bag-valve-mask

44. Demonstrate the advantage of the two-person method when ventilating with the bag-valve-

mask.

45. Demonstrate the ventilation techniques used for an adult patient to those used for pediatric

patients.

46. Describe indications, contraindications, advantages, disadvantages, complications, and

technique for ventilating a patient with an automatic transport ventilator (ATV).

47. Demonstrate safety considerations of oxygen storage and delivery.

48. Demonstrate an understanding of types of oxygen cylinders and pressure regulators

(including a high- pressure regulator and a therapy regulator).

49. Demonstrate the appropriate steps for delivering oxygen from a cylinder and regulator.

50. Demonstrate the appropriate use, advantages and disadvantages of an oxygen humidifier.

51. Describe the indications, contraindications, advantages, disadvantages, complications, liter

flow range, and concentration of delivered oxygen for supplemental oxygen delivery

devices.

52. Define, identify and describe a tracheostomy, stoma, and tracheostomy tube.

53. Define, identify, and describe a laryngectomy.

54. Demonstrate how to ventilate with a patient with a stoma, including mouth-to-stoma and

bag-valve- mask-to-stoma ventilation.

55. Demonstrate the appropriate management for special considerations in airway

management and ventilation for patients with facial injuries.

56. Demonstrate the special considerations necessary in airway management and

ventilation for the pediatric patient.

57. Demonstrate and understanding of endotracheal Intubation from other methods of

advanced airway management.

58. Demonstrate an understanding of the indications, contraindications, advantages,

disadvantages and complications of endotracheal Intubation.

59. Demonstrate the appropriate method used for laryngoscopy for the removal of a foreign

body airway obstruction.

60. Demonstrate an understanding of the indications, contraindications, advantages,

disadvantages, complications, equipment, and technique for direct laryngoscopy.

61. Demonstrate an understanding of visual landmarks for direct laryngoscopy.

62. Demonstrate the appropriate use of cricoid pressure during Intubation.

63. Demonstrate an understanding of the indications, contraindications, advantages,

disadvantages, complications, equipment and technique for digital endotracheal

Intubation.

64. Demonstrate an understanding of the indications, contraindications, advantages,

disadvantages, complications, equipment and technique for using a dual lumen

airway.

65. Demonstrate an understanding of the indications, contraindications, advantages,

disadvantages, complications and equipment for rapid sequence Intubation with

neuromuscular blockade.

66. Identify neuromuscular blocking drugs and other agents used in rapid sequence Intubation.

67. Demonstrate an understanding of the indications, contraindications, advantages,

disadvantages, complications and equipment for sedation during Intubation.

68. Demonstrate an understanding of sedative agents used in airway management.

69. Demonstrate an understanding of the indications, contraindications, advantages,

disadvantages, complications, equipment and technique for nasotracheal Intubation.

70. Demonstrate an understanding of the indications, contraindications, advantages,

disadvantages and complications for performing an open cricothyrotomy.

71. Demonstrate an understanding of the equipment and technique for performing an open

cricothyrotomy.

72. Demonstrate an understanding of the indications, contraindications, advantages,

disadvantages, complications, equipment and technique for translaryngeal catheter

ventilation (needle cricothyrotomy).

73. Demonstrate the appropriate method of assessment for confirming correct

placement of an endotracheal tube.

74. Demonstrate the appropriate method for securing an endotracheal tube.

75. Describe the indications, contraindications, advantages, disadvantages, complications,

equipment and technique for extubation.

**Major Topics/ Concepts/ Skills/ Issues**

* + Trauma Assessment and Management Skills
  + Pharmacology Concepts & Techniques
  + Basic and Advanced Airway Management Concepts
  + Vascular Access and Medication Administration Skills

**Shared Assessment(s) in this Course**

* + - Discussion questions
    - Quizzes
    - Simulations
    - Performance evaluations
    - Final examination

***VALENCIA STUDENT COMPETENCIES*:**

Valencia faculty have defined four interrelated competencies (Value, Think, Communicate, Act) that prepare students to succeed in the world community. These competencies are outlined in the Course Catalog. In this course, through classroom lecture and discussions, group lab work, and other learning activities, you will further develop mastery of these core competencies.

The following Valencia Student Competencies will be reinforced throughout the entire course.

1. **THINK** - Think clearly, critically, and creatively.

Analyze, synthesize, integrate, and evaluate in many domains of human inquiry

A. To think, what must you do?

• Analyze data, ideas, patterns, principles, and perspectives

• Employ the facts, formulas, and procedures of the disciplines

• Integrate ideas and values from different disciplines

• Draw well‑supported conclusions

• Revise conclusions consistently with new observations, interpretations, or reasons

B. How and where must you think?

• With curiosity and consistency

• Individually and in groups

2. **VALUE** - Make reasoned value judgments and responsible commitments

A. To value, what must you do?

• Recognize the values as expressed in attitudes, choices, and commitments

• Distinguish among personal, ethical, aesthetic, cultural, and scientific values

• Employ values and standards of judgment from different disciplines

• Evaluate your own and others’ values from individual, cultural, and global perspectives

• Articulate a considered and self‑determined set of values

B. How and where must you value?

• With empathy and fair‑mindedness

• Individually and in groups

3. **COMMUNICATE**

A. To communicate, what must you do?

• Identify your own strengths and need for improvement as communicator

• Employ methods of communication appropriate to your audience and purpose

• Evaluate the effectiveness of your own and others’ communication

B. How and where must you communicate?

• By speaking, listening, reading and writing

• Verbally, non‑verbally, and visually

• With honesty and civility

4. **ACT -** Act purposefully, reflectively, and responsibly

A. To act, what must you do?

• Apply disciplinary knowledge, skills, and values to educational and career goals

• Implement effective problem‑solving, decision‑making, and goal‑setting strategies

• Act effectively and appropriately in various personal and professional settings

• Assess the effectiveness of personal behavior and choices

• Respond appropriately to changing circumstances

B. How and where must you act?

• With courage and perseverance

• Individually and in groups

• In your personal, professional, and community life

# **LABORATORY POLICIES**

**ACADEMIC**

1. The student is responsible for all materials covered during the skills laboratory,

for assigned reading, completion of entries in FISDAP, BlackBoard

content/quizzes/discussion topics prior to the dates in the syllabus.

2. It is the responsibility of each student to spend sufficient time in the skills laboratory

to complete his or her skills. Competency must be demonstrated in the performance

of skills before being able to perform the skills in the clinical arena.

3. Quizzes and discussion topics may be completed on BlackBoard as available. They

must be completed by the date(s) and time(s) indicated in syllabus. There are no

make-ups on quizzes **unless done during an additional lab session**. Students are

required to arrive on time to start quiz. If you arrive to lab after the quiz has been

started, you will not be granted additional time to complete the quiz.

4. Discussion topics are counted as a participation points. In addition to quizzes

and scenario evaluation/testing, unannounced quizzes or scenario

evaluation/testing will be administered at the discretion of the faculty.

5. Reference materials are not permitted during scenario testing, quiz, or final

simulation.

6. Laboratory instructors will sign skill evaluation forms at the appropriately

designated times following the evaluation. If a student does not have **all** laboratory

skills performed or observed properly entered in FISDAP, the student’s grade will

be impacted based on the grading criteria.

7. FISDAP reports are due as indicated in syllabus.

8. At any point during the semester a student’s grade falls below a “C”, you will be

notified per College Policy. A meeting with the Laboratory Faculty will be

conducted as soon as possible. The decision to continue or withdraw is at the

discretion of the student unless other criteria supersede that decision.

# **ATTENDANCE**

1. Attendance at each scheduled skills laboratory appointment is required.

2. Students must attend at least six (6) hours of skills laboratory exercises per week.

All skills laboratory activities will be by appointment.

3. Students will only enter the simulation rooms at their appointment time, unless

permission is granted from a faculty member.

4. If a student signs up more than once in FISDAP, the attendance record will reflect

your first (1st) session.

5. Students that fail to attend first (1st) scheduled appointment will be considered

absent. Subsequent attendance will only be considered for makeup of missed skills

demonstration (not testing) and must be done the same week the absence occurs.

6. Students are responsible for registering for their simulation laboratory hours

on FISDAP, and if necessary must cancel appointments no later than the day

prior to the scheduled lab.

7. Same day FISDAP changes are required to be done via email or text to the Lab

Faculty.

8. Students are considered **LATE** if arrival is more than fifteen (15) minutes after

the scheduled start time. Three (3) incidences of being late equate to one (1)

absence.

9. Four (4) absences during the semester will result in withdrawal from the laboratory

and the student will receive a **WF** as a grade. Students who leave the lab before the

day/evening’s completion without instructor permission will be considered absent.

10. Any reference to a due date means the beginning of the lab session

registered to attend unless otherwise specified or granted.

# **DISCIPLINE**

1. The computers in the Simulation laboratory are to be used to complete related

assignments, Virtual IV skills (if used), BlackBoard content and FISDAP. Any

violation of Valencia College’s Internet Policy will be grounds for dismissal from

the Paramedic Program.

2. Respect other students at all times. The Simulation Laboratory is monitored

with various cameras used primarily for simulation, however are available for

monitoring the security of the college’s various equipment that are available to

students.

3. Students shall not deface any of simulation equipment or remove any items from the

laboratory.

4. Skills laboratory disruptions will not be tolerated and the student will be dismissed

from the laboratory.

5. During breaks, students will either stay in the skills laboratory or leave the building.

6. Students are required to follow Valencia College’s “Student Code of Conduct” Policy

(6HX28 8-03).

7. An objective or subjective opinion by a Valencia College instructor that a

student is under the influence of alcohol or drugs is grounds for immediate

withdrawal.

# **DRESS CODE**

1. Clinical attire must be worn during all skills laboratory sessions. A plain Polo shirt

or department collared uniform shirt may be substituted for the Valencia Student

shirt. A nametag must be also worn (i.e. ORMC name tag, department issued or

Valencia issued) if not wearing a Valencia polo.

2. No sandals, open toe shoes, or flip-flops will be permitted; only BLACK shoes that

are worn on clinicals will be permitted. Students are required to bring their own

stethoscope, eye protection, watch and appropriate PPE (gloves are provided by the

college). If you are not prepared per these guidelines, you will not be able to attend

or participate in the lab session.

3. Hats are not permitted during laboratory sessions.

# **GENERAL INFORMATION**

1. The skills laboratory manual will be retained by the student and turned in

on the last day of the semester. A faculty member will sign skill

summary/evaluation sheets.

2. Students **must** bring all educational materials to each session. If the student fails to

bring appropriate course materials to the simulation laboratory, the student **may** be

asked to leave and return to a later simulation session.

3. Each week students are required to enter all skills performed in lab in FISDAP.

4. The use of recording devices and cameras encouraged and acceptable, however,

such use must be communicated to the Simulation Faculty prior use.

5. Students are required to check out assigned equipment prior to the start of the lab

session (Defibrillators, airway bag, trauma bag, etc.). Any damage to equipment

must be reported to a faculty member.

# **GRADE DISPUTE (final exam)**

* + **STEP 1** – meet with Simulation Coordinator or designee to review recorded simulation and grades

o **STEP 2** – meet with Program Director and Simulator Coordinator or Medical Director to review any scenario recordings, grades and/or any other instructor documentation

* + **STEP 3** – meet with the Division Dean to discuss concern

# **GRADING SCALE**

A = 94–100%, B = 86-93%, C = 80–85%, F = <80%

# GRADING CRITERIA

* + - * 1st unsuccessful quiz **OR** 1st absence **OR** 1st unsuccessful skills testing

(not including the final practical exam) **OR** 1 incomplete/inadequate discussion topic submission **OR** evidence that DVR content / Blackboard videos were not review for a 1 week period (1 hour per week requirement) = no impact

* + - * 2nd unsuccessful quizzes **OR** 2nd absence **OR** 2nd unsuccessful skills testing

(not including the final practical exam) **OR** 2 incomplete/inadequate discussion topic submissions **OR** evidence that DVR content / Blackboard videos were not review for any combination of 2 week period (1 hour per week requirement)

= reduction 1letter grade (-8.33%)

* + - * 3rd unsuccessful quizzes **OR** 3rd absence **OR** 3rd unsuccessful skills testing

(not including the final practical exam) **OR** 3 incomplete/inadequate discussion topic submissions **OR** evidence that DVR content / Blackboard videos were not review for any combination of 3 week period (1 hour per week requirement)

= reduction 2 letter grades (-16.66%)

* + - * 4th unsuccessful quiz **OR** 4th absence **OR** 4th unsuccessful skills testing (not including the final practical exam) **OR** 4 incomplete/inadequate discussion topic submissions **OR** evidence that DVR content / Blackboard videos were not review for any combination of 4 week period (1 hour per week requirement) = F for the course.

# The sum of the any combination above will reduce your grade accordingly.

|  |  |
| --- | --- |
| **COMPONENTS** | **EXPLANATION** |
| Discussion Board | Complete as required. Late entries considered not completed. |
| FISDAP | All skills must be entered to get full credit |
| BlackBoard | All videos must be viewed to get full credit |
| Online DVR | All videos must be viewed to get full credit 1 hr/week reviewing videos |
| Scenario testing | Complete successfully on first attempt |
| Simulation participation | Must actively participate in scenarios |
| Quizzes | Must obtain 80% or higher to be considered a pass |
| \*CPR Adult | No more than 2 errors to be considered a pass |
| \*CPR Child | No more than 2 errors to be considered a pass |
| \*CPR Infant | No more than 2 errors to be considered a pass |
| Skill demonstrations |  |
| Intubation | Maximum 2 attempts to be considered a pass (must intubate successfully on 2nd attempt) |
| IV/ IV bolus | Maximum 2 attempts to be considered a pass |
| Decompression | No more than 2 errors to be considered a pass |
| Combitube | No more than 2 errors to be considered a pass |
| LTA | No more than 2 errors to be considered a pass |
| LMA / Combitube | No more than 2 errors to be considered a pass |
| Final practical | 1st attempt success = no impact on grade 2nd attempt pass = 1 letter grade reduction |

\*No pass in CPR = no card, student must take a 4 hour class; only 2 attempts to pass.

# **PRACTICAL EXAMINATION:**

The ITLS Practical Examination will serve as the skills laboratory summative assessment.

* + - * All students must successfully complete each section of the final.
      * Failure to pass the final will result in an F for the class and the inability of the student to continue to the next phase of the Paramedic program.
      * Students who do not attend the final exam will receive a F in the course.

All students will be given 2 opportunities to pass the Final Practical Examination.

* + - * Successful first attempt = No Impact on grade
      * Successful second attempt = Reduction one (1) letter grade (-8.33%)
      * If the student attends two (2) additional lab sessions, 8.33% will be added to the final grade **(this extra credit will only be applied to the Final Practical Examination)**. Please ensure lab faculty documents attendance to additional lab sessions. Student must stay and participate for the duration of extra labs. **Jamie Lowery must approve attendance for extra credit.**

I hereby affirm that I have received a copy of the grading policy. The grading policy was explained to be satisfactorily.

Name: Signature: Date:

# **COURSE EVALUATION**

* We value your feedback. At the conclusion of each semester, you will be required to complete a course evaluation for the laboratory
* The course evaluation must be completed before grades are entered
* To evaluate your online course, please follow these simple steps:
  + Step 1: log in to Atlas and click on the “My Courses tab”
  + Step 2: under the “Assessment of Online Instruction” section, click the Assessment Survey link
  + You will see a list of all the current Alternative Delivery courses you are enrolled in
  + Step 3: select the course you are evaluating, and click “Evaluate Course”
  + The courses are listed by Course Title, then by Term. All of your current courses will be listed.
  + To evaluate the course, simply click appropriate “Evaluate Course” button
  + Complete the evaluation and click the “Submit Responses” button

# ACADEMIC HONESTY

Each student is expected to be in compliance with the college catalog and student handbook. Any student caught violating these policies will receive a no pass or zero and may be subject to withdrawal from the program. Any student cheating or removing a practical examination sheet or attempting to transfer written content specific to tests/quizzes will receive a zero or a no pass on the quiz/scenario, etc. Any attempts to inappropriately prompt another student during simulation testing/evaluation will be determined as academic dishonesty. Video recordings are subject to be reviewed and used as evidence to support the instructor’s decision. The skills laboratory instructor at his/her discretion can recommend withdrawal of a student from the program based on academic dishonesty.

# DISCLAIMER

Changes in the syllabus and/or schedule may be made at any time during the semester by announcement of the professor. A revised syllabus may be issued at the discretion of the professor instructor.

**PARAMEDIC LABORATORY AGENDA – P1**

|  |  |  |  |
| --- | --- | --- | --- |
| **DATE** | **WEEK** | **TOPICS** | **ASSIGNMENTS** |
| 8/28 – 30 | 1 | Introduction / Lab overview / Equipment demonstration  EMT skills review (vital signs, IV setup, splinting, hemorrhage control, etc)  Simulations (medical); baseline testing | **Complete the introduction of yourself in the discussion forum on Blackboard** |
| 9/4 – 6 | 2 | **No lab due to Labor Day Holiday** | Familiarize yourself with Blackboard and DVR system |
| 9/11 – 13 | 3 | O2 devices and adjuncts (nasal cannula, NRB, SpO2, EtCO2, OPA, NPA, suction)  Lung sounds (on manikin)  Cardiac monitor (LP15)  Simulations (medical)  SAMPLE / OPQRST | Review Vol. 1, chapter 14, part 2 (Intravenous Access) for next week  Review NREMT assessment sheets |
| 9/18 – 20 | 4 | IV catheters/equipment (powerpoint);  Obtaining vascular access  Venipunctures / vacutainers practice  Simulations (medical) | Enter skills in FISDAP  Review DVR scenarios  DVR discussions due week 5 |
| 9/25 – 27 | 5 | Venipunctures / vacutainers practice  Simulations (medical) | Enter skills in FISDAP  Review Vol. 1, chapter 15 (Basic airway management) for next week |

**PARAMEDIC LABORATORY AGENDA – P1**

|  |  |  |  |
| --- | --- | --- | --- |
| **DATE** | **WEEK** | **TOPICS** | **ASSIGNMENTS** |
| 10/2 – 4 | 6 | **TESTING**   * IV technique * IV bolus   CPR review  BLS airways (BVM, supraglottic devices) | Review Volume 3 - Chapter 4 (History Taking)  DVR discussions due week 7 |
| 10/9 – 11 | 7 | CPR review  BLS airways (BVM, supraglottic devices)  Simulations (medical; differential diagnosis) | **DVR discussion #1 due**  Enter skills in FISDAP  Review Vol. 1, chapter 15 (Advanced airway management) for next week |
| 10/16 – 18 | 8 | Advanced airway management (powerpoint)  Advanced airway practice (OTI)  Simulations (medical; differential diagnosis) | Enter skills in FISDAP  Review CPR skills info on Blackboard |
| 10/23 – 25  MID-TERM | 9 | **TESTING**   * CPR * Medical assessment * Lung sounds | DVR discussions due week 10  Review Vol. 1, chapter 15 (Advanced airway management) for next week |
| 10/30 – 11/1 | 10 | Advanced airway practice (OTI)  Pleural decompression, surgical/needle cricothyrotomy demonstration | **DVR discussion #2 due**  Enter skills in FISDAP |
| 11/6 – 8 | 11 | Advanced airway practice (OTI)  Pleural decompression, surgical/needle cricothyrotomy practice | Enter skills in FISDAP  Review ITLS text (Primary/Secondary Survey) |
| 11/13 – 15 | 12 | **TESTING**   * Orotracheal intubation * BLS airways * Pleural decompression   ITLS overview (demonstration)  Simulations (trauma)  DCAP-BTLS, TIC, PMS | Enter skills in FISDAP  Review ITLS assessment sheets |

**PARAMEDIC LABORATORY AGENDA – P1**

|  |  |  |  |
| --- | --- | --- | --- |
| **DATE** | **WEEK** | **TOPICS** | **ASSIGNMENTS** |
| 11/20 – 21  **OPEN LAB**  No lab on 11/22 | 13 | **OPEN LAB –**  **ATTENDANCE IS NOT REQUIRED** | Review dosage calc section of text  Prepare for ITLS pretest due week 15 |
| 11/27 – 11/29 | 14 | Dosage calculations (units of measure, concentrations)  Simulations (trauma) | ITLS pretest due week 15 |
| 12/4 – 6 | 15 | Dosage calculations (drips)  Simulations (trauma) | **ITLS pretest due**  Review ITLS videos on Blackboard in preparation for final practical  FISDAP reports due week 16 |
| 12/11 or 12  **FINALS** | 16 | **TESTING**   * ITLS (written and practical) | **Turn in lab check off sheets**  **FISDAP reports due** |