VALENCIA COMMUNITY COLLEGE
PARAMEDIC III
EMS 2605 (5 Credit Hours)
Term A/May-June 2013

INSTRUCTOR INFORMATION:

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CLASSROOM SESSIONS **(Time and Location)**:

Monday and Wednesday	5:00 p.m. - 8:00 p.m. /Module 3-226
Tuesday and Thursday	10:00 a.m. - 1:00 a.m. /Module 3-226

COURSE DESCRIPTION**:**

EMS 2605 (Paramedic III) is the third course in the sequence necessary for completion of the Paramedic Program. The course is designed to reinforce and expand upon the materials and clinical skills learned at the EMT and Paramedic I and II levels, and to integrate prior learning with enhanced advanced life support concepts and skills. Emphasis is placed upon patient assessment and recognition of significant findings, prehospital differential diagnosis and treatment strategies, normal anatomy and physiology, pharmacology, pathophysiology, and the management of gynecologic emergencies, obstetrical emergencies, neonatal emergencies, pediatric emergencies, geriatric emergencies, abuse and assault, the challenged patient, acute interventions for the chronic patient and assessment based management.

PROGRAM GOALS**:**

1. To provide students with the knowledge and skills necessary to become competent entry level paramedics.

2. To provide students with the clinical skills necessary for proficiency as entry-level paramedics.

3. To develop and foster the behaviors, attributes, and attitudes of a professional in the field of out-of-hospital emergency care.

***COREQUISITES*:**

EMS 2605L, EMS 2437, EMS 2668. All courses must be completed with a "C" (80%) or greater.

EDUCATIONAL MATERIALS:

Paramedic Care: Principles and Practices, Third Edition, Volumes 3 and 5, Brady, Latest Edition.

Pediatric Advanced Life Support (PALS), American Heart Association, Latest Edition.

Taber's Cyclopedic Medical Dictionary, Thomas, F. A. Davis, Latest Edition.

***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. Any student with a disability should contact the Program Director within the first week of class.

2. Withdrawal from EMS classes: Students are advised to consult the VCC catalog regarding the last date for withdrawal from classes. It is the responsibility of the student to complete the necessary paperwork for academic withdrawal. Students who fail to complete the appropriate steps for academic withdrawal will receive a final grade of either "F" or "WF."

3. Readmission to the Paramedic Program: Any student who withdraws from, or fails EMS 2605 and/or any corequisite 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.

4. Students who have withdrawn from or failed the third semester more than one (1) year prior to application for readmission will be required to repeat Semester II of the program. Students who apply for readmission to the program in the following academic year will be required to successfully complete the Paramedic II final examination with a score of 80% or greater and pass the Paramedic II skills laboratory final competency testing in all skills prior to readmission to the program. Individuals who fail to pass the Semester II final exam on the first attempt and/or skills competency testing within two attempts will be required to repeat the second semester of the program.

***COURSE REQUIREMENTS*:**

1. Attendance to all lecture sessions is mandatory. Attendance is taken by the instructor at all class sessions at the beginning of class, and, at the instructor's discretion, may be taken at the end of class.

2. Students arriving more than fifteen (15) minutes after the beginning of a class, or leaving more than fifteen (15) minutes before the end of class will be marked as absent. Arrival at any time after the beginning of class is considered tardiness. Three (3) episodes of tardiness will constitute one (1) absence. No exceptions are made to this rule.

3. Students may not perform clinical rotations during scheduled class sessions. Late arrival to class due to delay at a clinical site is not considered excused tardiness.

4. If a student fails to attend three (3) class sessions, he/she will be placed on academic probation, and will meet with the Program Director to discuss continuation in the program. Any more absences will result in academic withdrawal from the Paramedic Program.

5. It is the student's responsibility to notify the instructor if an absence or tardiness is unavoidable.

6. The student is responsible for all materials, quizzes, or examinations missed.

7. In addition to scheduled exams and quizzes, unannounced quizzes may be administered at the instructor's discretion.

8. All reading assignments should be completed prior to lecture.

9. Successful completion of Pediatric Advanced Life Support is required.

GRADING SCALE AND CRITERIA:

94 - 100% = A
86 - 93% = B
80 - 85% = C
74 - 80% = D

1. Final grade is based upon the total points earned from module exams and quizzes.

2. Points are converted to a letter grade at the end of the semester.

3. Any student who receives less than an 80% on any module examination will be subject to remedial education. The rationale for this is that all portions of the curriculum are essential for successful completion of the Paramedic Program. Within two weeks following the examination completion date the student must complete a topic specific learning packet as prescribed by the instructor. Upon completion of this and within the same two-week time period, the student is to retake the module exam, completing it with a score of 80% or greater. <u>The first module exam score will be recorded as the grade</u>. Failure to comply or successfully complete the learning packet or second module exam will result in termination from the program.

4. Grades are not curved for any test or on final comprehensive averages in any EMS course.

***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

STUDENT CODE OF CONDUCT:

Valencia Community College is dedicated not only to the advancement of knowledge and learning but also has concern for the development of responsible personal and social conduct. By enrolling at Valencia Community College, a student assumes the responsibility for becoming familiar with and abiding by the general rules of conduct. The primary responsibility for managing the classroom environment rests with the faculty. Students who engage in any prohibited or unlawful acts that result in disruption of a class may be directed by the faculty member to leave the class. Violation of any classroom or Valencia's rules may lead to disciplinary action up to and including expulsion from Valencia. Disciplinary action could include being withdrawn from class, disciplinary warning, probation, suspension, expulsion, or other appropriate and authorized actions. You will find the Student Code of Conduct in the current Valencia Student Handbook.

ACADEMIC HONESTY:

Each student is expected to be in compliance with the college catalog and student handbook. Any student who cheats on an exam or quiz will receive a zero and may be subject to withdrawal from the class.

DISCLAIMER:

Changes in this syllabus may be made at any time during the semester by announcement to this effect. A revised syllabus may be issued at the discretion of the instructor.

STRATEGIES FOR SUCCESS:

The paramedic program is an intensive academic and clinical activity for a full year. Balancing class and clinical requirements with work, family, and other commitments is difficult, and requires careful planning, excellent time management, and good study habits. Successful completion of the program requires strong academic performance; mastery of knowledge objectives; proficiency in technical skills; ability to integrate knowledge and skills into practice; and development of behaviors and attitudes consistent with the roles, responsibilities and performance of prehospital healthcare professionals. In addition, the instructors will schedule regular study groups to review class material and answer questions. These sessions are optional, but may be helpful. In addition, students are encouraged to form their own study groups and meet on a regular basis for review and problem-solving.

Some suggestions for successful preparation and performance include:

1. Use weekends wisely--read ahead through all chapters for the following week.

2. Read the corresponding chapters at least twice. Be sure to focus study efforts on the objectives listed at the beginning of the chapter.

3. After each lecture, review the chapter(s), emphasizing mastery of the objectives.

4. Use the chapter objectives and class notes to study for quizzes and module examinations.

5. Have a good night's sleep and an adequate meal before quizzes and exams.

6. Use slow times during clinical rotations to ask questions, to study and review, to finish class paperwork, or to practice with equipment and discuss techniques.

7. Practice skills and procedures routinely--don't wait until midterm or final skills testing.

8. Practice and review standard charting formats, procedures and abbreviations. Use your medical dictionary--correct spelling and usage is important.

9. Make an effort to learn appropriate medical terminology related to clinical practice. Vocabulary lists and flash cards may be helpful.

10. Study medications commonly taken at home. Learn their indications and side effects. Patient's medications provide the paramedic with substantial information regarding the patient's medical histories. Again, lists and flash cards may be helpful.

PARAMEDIC III
EMS 2605 COURSE AGENDA
MAY-JUNE, 2013

Day/Date	Class	Topic	Reading Assignment
M/T – 5/6-7	1	Gynecologic and Obstetrical Emergencies	Vol. 3 Chs. 13, 14
W/R – 5/8-9	2	Gynecologic and Obstetrical Emergencies	Vol.3 Chs. 13, 14
M/T – 5/13-14	3	Pediatric Emergencies Assessment and Evaluation Anatomical and Developmental Differences	Vol. 5 Ch. 2
W/R – 5/15-16	4	Pediatric Medical Emergencies/SIDS	Vol. 5 Ch. 2
M/T – 5/20-21	5	Pediatric Traumatic Emergencies	Vol. 5 Ch. 2
W/R – 5/22-23	6	**EXAM 1 (Classes 1-5)**	
W/R – 5/29-30	7	Geriatric Emergencies	Vol. 5 Ch. 3
M/T- 6/3-4	8	The Challenged Patient Acute Interventions for the Chronic Care Patient	Vol. 5 Ch. 5, 6
W/R – 6/5-6	9	Environmental Emergencies	Vol. 3 Ch. 10
M/T – 6/10-11	10	Abuse and Assault Assessment Based Management Case Studies and Management	Vol. 5 Ch. 4, 7
W/R – 6/12-13	11	**EXAM 2 (Classes 7-10)**	
*Monday 6/17		**Pediatric Advanced Life Support Certification**	**EMS Skills Laboratory**

PARAMEDIC III

LEARNING OBJECTIVES

GYNECOLOGICAL EMERGENCIES

1. Identify the location and function of the following organs: ovaries, fallopian tubes, uterus, endometrium, cervix, vagina, labia, perineum.
2. Describe the stages of the menstrual cycle.
3. Discuss assessment of the gynecological patient.
4. Discuss the recognition and management of pelvic inflammatory disease (PID).
5. Discuss nontraumatic causes of gynecological abdominal pain in the female.
6. Discuss the physical and psychological implications of rape and sexual assault and describe prehospital management.

OBSTETRICAL EMERGENCIES

1. Identify the normal sites of fertilization and implantation of the fertilized egg.
2. Describe fetal-maternal blood flow and the role of the placenta.
3. Define the following terms: antepartum, postpartum, natal, primigravida, multigravida, prenatal, primipara, multipara.
4. Identify the details of the history that should be obtained from an obstetrical patient.
5. Discuss the effects of pregnancy on pre-existing conditions such as diabetes, hypertension, and cardiac problems.
6. Define the following terms: spontaneous abortion, criminal abortion, therapeutic abortion.
7. Describe the management of the patient who has suffered abortion.
8. Describe the pathophysiology and management of the following conditions: ectopic pregnancy, abruptio placentae, placenta previa.
9. Distinguish between pregnancy-induced hypertension, preeclampsia, and eclampsia.
10. Describe pathophysiology and prehospital management of the hypertensive disorders of pregnancy.
11. Describe the stages of labor and the approximate length of each stage.
12. List and describe the steps of a normal delivery.
13. Describe the management, during delivery, of a cord that becomes wrapped around the baby’s neck.
14. Describe the management of a breech presentation.
15. Describe the pathophysiology and management of a prolapsed cord.
16. Describe the management of a multiple-birth delivery.
17. Describe the pathophysiology and management of the following conditions: postpartum hemorrhage, uterine inversion, uterine rupture.

EMERGENCY MANAGEMENT OF THE NEONATE

1. Describe the routine care of the newborn.
2. List four means by which heat loss occurs in neonates.
3. Define the parameters of APGAR scoring and the numerical values used.
4. Identify special considerations in the care of the premature neonate.
5. Explain the significance of meconium staining.
6. Describe the inverted pyramid approach to neonatal resuscitation.
7. Describe two methods of stimulating a distressed neonate.
8. Describe the appropriate administration of oxygen to a neonate.
9. Describe the indications for endotracheal intubation of a distressed neonate.
10. Describe methods and problems in ventilating the distressed infant.
11. Describe the techniques and rates used in cardiac massage in the neonate.
12. List drugs and fluids used in neonatal resuscitation and give the correct dosages.

PEDIATRIC EMERGENCIES

1. Describe the typical child's emotional response to an emergency.
2. List appropriate developmental milestones for each age group of children, and relate the appropriate approach to patient assessment.
3. Discuss the typical parents' response to a pediatric emergency.
4. Describe pediatric patient assessment.
5. Describe the normal and abnormal appearance of the anterior fontanelle in the infant.
6. Describe the role of non-invasive monitoring in prehospital pediatric emergency care.
7. Discuss pediatric trauma emergencies, and compare them to trauma emergencies seen in adult patients.
8. Describe the characteristics of the abused child and of the child abuser.
9. Describe signs and symptoms suggestive of child abuse or neglect.
10. List management techniques to use when treating an abused child.
11. Discuss the pathophysiology, assessment, and prehospital management of the following pediatric neurological emergencies: seizures, febrile seizures, meningitis, Reye's syndrome.
12. Discuss the pathophysiology, assessment, and prehospital management of the following pediatric respiratory emergencies: aspirated foreign body, croup, epiglottitis, bronchiolitis, asthma, status asthmaticus.
13. Discuss the pathophysiology, assessment, and management of the following pediatric gastrointestinal emergencies: nausea and vomiting, diarrhea.
14. Discuss the pathophysiology, assessment, and prehospital management of the following pediatric cardiovascular emergencies: dehydration, sepsis, dysrhythmias, congenital heart disease.
15. Define Sudden Infant Death Syndrome (SIDS), the theories of etiology, and management in the prehospital setting.
16. Describe the concept of Pediatric Advanced Life Support (PALS).
17. Describe the modifications required for pediatric advanced life support, including drug dosage, endotracheal intubation, defibrillation, and IV therapy.

ABUSE AND ASSAULT

1. Discuss the incidence of abuse and assault.
2. Describe the categories of abuse.
3. Discuss examples of spouse abuse.
4. Discuss examples of elder abuse.
5. Discuss examples of child abuse.
6. Discuss examples of sexual assault.
7. Describe the characteristics associated with the profile of the typical abuser of a spouse.
8. Describe the characteristics associated with the profile of the typical abuser of the elder.
9. Describe the characteristics associated with the profile of the typical abuser of children.
10. Describe the characteristics associated with the profile of the typical assailant of sexual assault.
11. Identify the profile of the "at-risk" spouse.
12. Identify the profile of the "at-risk" elder.
13. Identify the profile of the "at-risk" child.
14. Discuss the assessment and management of the abused patient.
15. Discuss the legal aspects associated with abuse situations.
16. Identify community resources that are able to assist victims of abuse and assault.
17. Discuss the documentation associated with abused and assaulted patients.

PATIENTS WITH SPECIAL CHALLENGES

1. Describe the various etiologies and types of hearing impairments.
2. Recognize the patient with a hearing impairment.
3. Anticipate accommodations that may be needed in order to properly manage the patient with a hearing impairment.
4. Describe the various etiologies of visual impairments.
5. Recognize the patient with a visual impairment.
6. Anticipate accommodations that may be needed in order to properly manage the patient with a visual impairment.
7. Describe the various etiologies and types of speech impairments.
8. Recognize the patient with a speech impairment.
9. Anticipate accommodations that may be needed in order to properly manage the patient with a speech impairment.
10. Describe the various etiologies of obesity.
11. Anticipate accommodations that may be needed in order to properly manage the patient with obesity.
12. Describe paraplegia/quadriplegia.
13. Anticipate accommodations that may be needed in order to properly manage the patient with paraplegia/quadriplegia.
14. Describe mental illness.

15. Describe the various etiologies of mental illness.
16. Recognize the presenting signs of the various mental illnesses.
17. Anticipate accommodations that may be needed in order to properly manage the patient with a mental illness.
18. Define the term developmentally disabled.
19. Recognize the patient with a developmental disability.
20. Anticipate accommodations that may be needed in order to properly manage the patient with a developmental disability.
21. Describe Down's syndrome.
22. Recognize the patient with Down's syndrome.
23. Anticipate accommodations that may be needed in order to properly manage the patient with Down's syndrome.
24. Describe the various etiologies of emotional impairment.
25. Recognize the patient with an emotional impairment.
26. Anticipate accommodations that may be needed in order to properly manage the patient with an emotional impairment.
27. Define emotional/mental impairment (EMI).
28. Recognize the patient with an emotional or mental impairment.
29. Anticipate accommodations that may be needed in order to properly manage patients with an emotional or mental impairment.
30. Describe the following diseases/illnesses:
    a. Arthritis
    b. Cancer
    c. Cerebral palsy
    d. Cystic fibrosis
    e. Multiple sclerosis
    f. Muscular dystrophy
    g. Myasthenia gravis
    h. Poliomyelitis
    i. Spina bifida
    j. Patients with a previous head injury
31. Identify the possible presenting sign(s) for the following diseases/illnesses:
    a. Arthritis
    b. Cancer
    c. Cerebral palsy
    d. Cystic fibrosis
    e. Multiple sclerosis
    f. Muscular dystrophy
    g. Myasthenia gravis
    h. Poliomyelitis
    i. Spina bifida
    j. Patients with a previous head injury

32. Anticipate accommodations that may be needed in order to properly manage the following patients.
    a. Arthritis
    b. Cancer
    c. Cerebral palsy
    d. Cystic fibrosis
    e. Multiple sclerosis
    f. Muscular dystrophy
    g. Myasthenia gravis
    h. Poliomyelitis
    i. Spina bifida
    j. Patients with a previous head injury
33. Define cultural diversity.
34. Recognize a patient who is culturally diverse.
35. Anticipate accommodations that may be needed in order to properly manage a patient who is culturally diverse.
36. Identify a patient that is terminally ill.
37. Anticipate accommodations that may be needed in order to properly manage a patient who is terminally ill.
38. Identify a patient with a communicable disease.
39. Recognize the presenting signs of a patient with a communicable disease.
40. Anticipate accommodations that may be needed in order to properly manage a patient with a communicable disease.
41. Recognize sign(s) of financial impairments.
42. Anticipate accommodations that may be needed in order to properly manage a patient with a financial impairment.

ACUTE INTERVENTION FOR THE CHRONIC CARE PATIENT

1. Compare and contrast the primary objectives of the ALS professional and the home care professional.
2. Identify the importance of home health care medicine as related to the ALS level of care.
3. Differentiate between the role of EMS provider and the role of the home care provider.
4. Compare and contrast the primary objectives of acute care, home care and hospice care.
5. Summarize the types of home health care available in your area and the services provided.
6. Discuss the aspects of home care that result in enhanced quality of care for a given patient.
7. Discuss the aspects of home care that have a potential to become a detriment to the quality of care for a given patient.
8. List complications commonly seen in the home care patients which result in their hospitalization.

9. Compare the cost, mortality and quality of care for a given patient in the hospital versus the home care setting.
10. Discuss the significance of palliative care programs as related to a patient in a home health care setting.
11. Define hospice care, comfort care and DNR/DNAR as they relate to local practice, law and policy.
12. List the stages of the grief process and relate to an individual in hospice care.
13. List pathologies and complications typical to home care patients.
14. Given a home care scenario, predict complications requiring ALS intervention.
15. Given a series of home care scenarios, determine which patients should receive follow-up home care and which should be transported to an emergency care facility.
16. Describe airway maintenance devices typically found in the home care environment.
17. Describe devices that provide or enhance alveolar ventilation in the home care setting.
18. List modes of artificial ventilation and an out-of-hospital situation where each might be employed.
19. List vascular access devices found in the home care setting.
20. Recognize standard central venous access devices utilized in home health care.
21. Describe the basic universal characteristics of central venous catheters.
22. Describe the basic universal characteristics of implantable injection devices.
23. List devices found in the home care setting that are used to empty, irrigate or deliver nutrition or medication to the GI/GU tract.
24. Describe complications of assessing each of the airway, vascular access, and GI/GU devices described above.
25. Given a series of scenarios, demonstrate the appropriate ALS interventions.
26. Given a series of scenarios, demonstrate interaction and support with the family members/support persons for a patient who has died.
27. Describe common complications with central venous access and implantable drug administration ports in the out-of-hospital setting.
28. Describe the indications and contraindications for urinary catheter insertion in an out-of-hospital setting.
29. Identify the proper anatomy for placement of urinary catheters in males and females.
30. Identify failure of GI/GU devices found in the home care setting.
31. Identify failure of ventilatory devices found in the home care setting.
32. Identify failure of vascular access devices found in the home care setting.
33. Identify failure of drains.
34. Differentiate between home care and acute care as preferable situations for a given patient scenario.
35. Discuss the relationship between local home care treatment protocols/SOPs and local EMS Protocols/SOPs.
36. Discuss differences in individuals ability to accept and cope with their own impending death.
37. Discuss the rights of the terminally ill.

ASSESSMENT BASED MANAGEMENT

1. Explain how effective assessment is critical to clinical decision making.
2. Explain how the paramedic's attitude affects assessment and decision making.
3. Explain how uncooperative patients affect assessment and decision making.
4. Explain strategies to prevent labeling and tunnel vision.
5. Develop strategies to decrease environmental distractions.
6. Describe how manpower considerations and staffing configurations affect assessment and decision making.
7. Synthesize concepts of scene management and choreography to simulated emergency calls.
8. Explain the roles of the team leader and the patient care person.
9. List and explain the rationale for carrying the essential patient care items.
10. When given a simulated call, list the appropriate equipment to be taken to the patient.
11. Explain the general approach to the emergency patient.
12. Explain the general approach, patient assessment, differentials, and management priorities for patients with the following problems:
    a. Chest pain
    b. Medical and traumatic cardiac arrest
    c. Acute abdominal pain
    d. GI bleed
    e. Altered mental status
    f. Dyspnea
    g. Syncope
    h. Seizures
    i. Environmental or thermal problem
    j. Hazardous material or toxic exposure
    k. Trauma or multi trauma patients
    l. Allergic reactions
    m. Behavioral problems
    n. Obstetric or gynecological problems
    o. Pediatric patients
13. Describe how to effectively communicate patient information face to face, over the telephone, by radio, and in writing.

COMPETENCIES OF A VALENCIA GRADUATE

The competencies listed below will be addressed throughout the course. Specific topics are included which relate explicitly to each area with examples of each.

1. Think critically

   Each topic presented requires students to use the acquired knowledge by analyzing and correlating the information to evaluate a given clinical situation. Specific topics include correlation of physical examination of a patient in cardiac or respiratory failure. They must use the information to make a judgment regarding further procedures for life support.

2. Read, listen, write and speak effectively

   Students will demonstrate by class participation, exams, and written and oral case studies. They must read the case workup and write or verbally respond to each set of symptoms.

3. Understand and use quantitative information

   Students will demonstrate by explaining and interpreting blood pressure and pulse, and acid and base balance.

4. Have the knowledge and skills necessary for effective citizenship

   Students must effectively understand the rules and regulations regarding their profession. They will interact with the State regulatory agencies throughout their training and internship. They will be expected to acquire the necessary skills to deal with people in stressful situations and to follow the practices and guidelines established by the legal agencies of the communities.

5. Recognize the value of physical and mental health

   The body systems are studied in health and disease. Students will understand both processes and learn the benefits of maintaining health physically and mentally. The information on specific diseases will show methods of prevention. All students will know and practice the universal body fluid precautions and be well-educated in all aspects of the transmission of disease.

CLAST COMPETENCIES

The following competencies will be addressed throughout the course. Specific examples are listed for each topic.

Reading Skills

Literal comprehension will be tested by written exams and oral presentations. Students must recognize major pathologies and support their hypothesis with effective diagnosis and treatment.

Critical comprehension will be used to distinguish between an actual physical process in the body versus psychological responses. Students must draw conclusions based on thorough understanding of the body processes and variable patient responses. Case histories will be used in the course to enable the student to develop the critical comprehension process necessary to aid rapid diagnosis.

English Language Skills

Demonstration of effective word choices will be evaluated by giving short essay questions on quizzes or exams. Students must use proper terminology and short, concise statements to respond to questions regarding structure and physiology of the human body.

Conventional sentence structure will be required of students in responding to essay questions. All material will be evaluated for word choices, grammar, spelling, and capitalization.

Standard English will be required in maintaining subject, noun, adjective, and adverbs correctly. Sentences will be corrected for proper verb tense.

Spelling, punctuation, and capitalization will be noted on short essay responses. Students must use medical terminology correctly with appropriate conformity to standard practices.

Mathematics Skills

Arithmetic skills will be used to calculate average pulse and blood pressure values and compare to reference ranges. Also, values of clinical examinations will be evaluated.

Basic algebra will be necessary to understand the values of tests that are used to determine pathological conditions referenced with values of healthy individuals.

Statistics is used to understand graphs and interpret results of clinical testing regarding health and disease. Data from the CDC in Atlanta will be interpreted to follow the course of infectious disease transmission.

Logical reasoning is used to determine conclusions regarding the physiology of the body systems when placed in an unfavorable environment. Homeostasis mechanisms must be interpreted and logical conclusions determined as to the status of the individual. Data must be accumulated, individual variables must be considered, and deductions must be made from a given set of circumstances when students are studying malfunctions of body systems.