

Stony Brook University

Paramedic Program

Policies & Procedures

The Stony Brook Paramedic Program is accredited by:

Middle States Commission on Higher Education

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[Middle States Commission on Higher Education](http://www.msche.edu)

The Stony Brook Paramedic Program is accredited by the Commission on Accreditation of Allied Health Education Programs upon the recommendation of the Committee on Accreditation of

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Introduction & General Policies:

In addition to the course website, The Policies and Procedures provide the framework for the orderly conduct of the paramedic program. They are intended to ensure a thorough and complete education for each of the students. It is the responsibility of the student to know and satisfy the program requirements. Please also reference the following important School of Health Technology and Management documents. They are available through the course website. If there is any overlapping or contradictory information between this Paramedic Program Handbook and any of the above documents this Paramedic Program Handbook takes precedence.

- Letter from the Dean to all new SHTM Students
- SHTM Mission Statement
- Student Handbook Table of Contents
- Student Orientation Handbook
- Academic Standing
- Academic Standing - Grading
- Academic Policies - Dishonesty
- Clinical Practicum - Student Responsibility
- Non-Discrimination Policy
- Sexual Harassment Policy

Functional Job Analysis - Paramedic

For a functional job analysis as described by the New York State Department of Health click [HERE](#)

Admission Policy

The Paramedic Program will not discriminate in its admission policies on the basis of sex, race, national origin, religion, or sexual preference.

Admission is based on a personal interview with the program staff or staff member.

At a minimum all candidates must:

- Hold a high school diploma or equivalent and;
- Be a currently certified New York State EMT or AEMT and;
- Be a nationally registered EMT and be eligible for NYS EMT certification

Note: At the discretion of the program director, applicants who have completed an EMT program and are awaiting results may be provisionally admitted into the program. Students are responsible to maintain a valid New York State (A)EMT and NREMT- EMT Basic certification for the duration of the course.

Advanced Placement

The Stony Brook University Paramedic Program currently only accepts advanced placement petitions from prior students of the Stony Brook Program.

Credit for Experiential Learning

Applicants to the program with professional credentials (RN, PA, MD, etc.) may petition the Medical Director for advanced standing. Such advanced standing will be considered on a case by case basis and is not guaranteed.

Americans with Disabilities Act

If you have a physical, psychological, medical or learning disability that may impact your course work, please contact Disability Support Services, ECC (Educational Communications Center) Building, room 128, (631) 632-6748. They will determine with you what accommodations, if any, are necessary and appropriate. All information and documentation is confidential.

Academic Integrity

Each student must pursue his or her academic goals honestly and be personally accountable for all submitted work. Representing another person's work as your own is always wrong. Faculty are required to report any suspected instances of academic dishonesty. Faculty in the Health Sciences Center (School of Health Technology & Management, Nursing, Social Welfare, Dental Medicine) and School of Medicine are required to follow their school-specific procedures. For more comprehensive information on academic integrity, including categories of academic dishonesty, please refer to the SHTM Academic Policies and Procedures.

Critical Incident Management

Stony Brook University expects students to respect the rights, privileges, and property of other people. Faculty are required to report to the Office of Judicial Affairs any disruptive behavior that interrupts their ability to teach, compromises the safety of the learning environment, or inhibits students' ability to learn. Faculty in the HSC Schools and the School of Medicine are required to follow their school-specific procedures. (Contact the SHTM Dean's Office 4-2252.)

Withdrawals, and Refunds

Please follow the following link:

<http://www.stonybrook.edu/bursar/tuition/professional/htm.shtml?emt>

Communication

Students are responsible to immediately advise the program director of any changes in their contact information.

The primary methods used to communicate with the students are email and via the Course Website. Students are required to check for new messages and website postings and changes at least every 24 hours, failure to do so may result in missed deadlines, beneficial information, and other important material that may affect the student's academic and professional standing.

Students may be assigned a university email address (@stonybrook.edu) in addition to the personal email address that they provided during the application process. It is important that both email accounts are monitored for important information that may be received from the university or the program.

Computer Access Requirement & Use

All students enrolled in the paramedic program are required to have access to a personal computer. This may be achieved by individual ownership, access to a family machine, or another suitable arrangement. At a minimum, this access must include a current version of the Microsoft Word®, Microsoft PowerPoint®, Microsoft Excel®, Adobe Acrobat® or compatible PDF format reader, Blackboard®, Google Docs®, FISDAP, e-mail, and to the Internet for research purposes. Free and inexpensive software may be available at the [Stony Brook University Information Technology website](#).

The use of computers during class is at the discretion of the program director. In order to minimize distractions the allowed use of these devices is limited to taking notes, reviewing slides, and referencing information directly related to the lecture topic. All other software including Instant messaging, email, email notification systems, social networking, and other programs must be turned off during class. Failure to comply with this requirement may result in penalties including, but not limited to, the banning of all computers in class.

Cell Phones in Class

Cell phones, pagers, and similar items can be a significant distraction to both students and instructors. To ensure the best possible learning environment for all concerned these devices must be powered off during class and lab sessions.

Physical Examination

All students must have a physical examination from a licensed physician. This physical exam must comply with the standards set forth by the School of Health Technology and Management and the HSC Health History and Examination Form completed and filed with the Student Health Service. Your Physical exam and titers (as well as drug test and background check) have to be completed and attested to by Castlebranch by the stated deadline. This means that we have to have clearance from Castlebranch by this date. The process can take time so it is important to start the process early. IF ALL CLEARANCES FROM CASTLEBRANCH ARE NOT RECEIVED BY THE ESTABLISHED DEADLINE, YOU WILL BE DROPPED FROM CLASS.

Professional Liability Insurance

Students are required to provide and maintain professional liability insurance coverage with claim coverage of up to one million dollars (\$1,000,000) and aggregate coverage of up to three million dollars (\$3,000,000). Students must have proof of insurance prior to the established deadline and must be in force for the entire program. The cost of this insurance is the responsibility of the student. Students typically purchase insurance coverage on-line from Healthcare Providers Service Organization (HPSO). Follow the instructions below:

Go to: HPSO website

When asked to select your "Primary area of study" select: EMS-Basic/Intermediate. (Do not select Paramedic)

While completing the form authorize fax of binder to 631-444-7863 (this will send the required binder to your Course Director)

Receive and file a copy of your Insurance certificate. A copy of this certificate will be accepted as proof of coverage in lieu of the faxed binder.

Drug Testing - Background Check

Stony Brook University requires students to successfully pass a drug screening test and background check by an established deadline prior to the beginning of the program. Drug test, background check and other related expenses will be the responsibility of the student. All these required competencies must be confirmed as complete by Castlebranch by the deadline or you will be dropped from the program.

With regard to the drug test, the student must provide to the Course Director a copy of the test results no later than the next class date following the results of the test. Please note: A refusal to submit to, a positive finding as a result of such testing, or failure to provide a copy of the test results within the time allowed will be grounds for termination from the program.

Extra Help / Office Hours

The program director has scheduled open office hours during which students may receive a personal consultation regarding any matter related to the course. Office hours are available by appointment only.

Instructors may offer extra help sessions. Attendance is voluntary, however if plans change after making a commitment to attend the student is required to provide the appropriate notice. Students who fail to do so may be subject to penalties more fully described in the Attendance section of this document.

Hand Washing

It is required that you wash your hands before and after every patient contact and again as you leave the room. If you are going to wear gloves you must wash your hands prior to putting the gloves on and immediately after removing the gloves. While handwashing with soap and water is the preferred process it is acceptable to use the waterless handwashing product. If after you care for one patient you wash your hands you must wash your hands a second time if you then go to care for another patient.

Confidentiality Issues

Paramedic students are required to respect the rights of patients including the right to confidentiality and shall safeguard patient confidences. As a member of the patient care team, students will have access to information from patient medical records and/or computer-stored information. This information may not be discussed with anyone unless this disclosure is required in the performance of duties and responsibilities. It is a breach of confidentiality to review medical records or to access computer-stored patient information not required in the performance of assigned duties. Students are responsible for maintaining the confidence of patients by sharing confidential information only with others who need to know and by handling any documentation of information appropriately. Students should note that the confidentiality policy applies to all student-patient interactions, in both formal curricular and extracurricular or volunteer contexts.

The Stony Brook University Hospital has a specific policy and they require that each student signs to acknowledge their receipt and understanding of their specific policy. The written policy can be downloaded from the "Forms" page of the Course Website.

Unethical Behavior

Substantiated cases of unethical behavior on the part of the student will likely result in the immediate recommendation for termination. Examples of unethical behavior and unprofessional conduct include, but are not limited to: plagiarism (e.g., copying another student’s work, quoting material from the publications or the internet or any other source without proper citation and receiving credit for the work as one’s own), cheating, dishonesty, falsification of documents, violations of confidentiality mistreatment of patients (simulated or real) inappropriate online activities, including materials made available through social networking sites, displaying public behavior that may reflect negatively on the student, University, and profession (i.e. excessive consumption of alcohol, viewing potentially offensive medical images on public computers, discussing potentially offensive portions of the medical curriculum or clinical experience (i.e. patient death or patient care, etc.) unlawful activity.

Students who are placed under arrest must report this to the program director within 48 hours.

Uniform / Dress Code Description

Depending on the venue, various dress requirements are necessary. Please consult the table below whenever a specific type of dress is referenced in this document.

Reference	Description	Venue
Student uniform	<ul style="list-style-type: none"> ● Shirt: Dark navy blue, long or short sleeves, button-down, with collar, shoulder epaulets. ● Pants: Dark navy blue EMS type, black belt ● Belt: Uniform style black or dark navy leather or canvas. ● Shoes: Black leather. Boots preferred. (No sneakers) ● Jacket: (if worn): Dark navy blue ● Reflective Vest ● Personal Protective Equipment (PPE) <p>No emblems, insignia, embroidery, or patches permitted at any time (Except for program supplied items)</p> <p>Other equipment:</p> <ul style="list-style-type: none"> ● Watch with second hand ● Stethoscope required ● STUDENT ID MUST BE AVAILABLE ON DEMAND 	Class nights Lab nights Ambulance rotations.

	Uniform must be worn correctly at all times. (eg. Shirts buttoned and tucked into pants, boots fully fastened, etc.)	
Scrubs with white clinical lab coat	<p>White clinical lab coat: Short (Waist-length) worn over hospital scrubs SOLID BLACK in color. Dark shoes.</p> <p>Watch with second hand & Stethoscope required STUDENT ID MUST BE VISIBLE AT ALL TIMES</p> <p>Do not bring backpacks, pocketbooks or anything else to operating room rotation sites; there is nowhere to store them</p>	<p>Class nights Emergency Room, Burn Unit L&D Phlebotomy PICU MICU SICU CCU NICU Cath. Lab ME Office Vet's home. Operating Room</p>
General	<ul style="list-style-type: none"> • Students should pay attention to personal hygiene and be well-groomed at all times. Beards cannot be worn. • SUNY Stony Brook issued identification must be carried at all times while attending a clinical rotation or when on university property. • Students improperly dressed will be sent home and will receive a failure/incomplete grade for the rotation or class in addition to an absence. 	

Minimum Course Requirements

In order to pass the paramedic course students must meet minimum standards in three distinct areas:

- Academic Standards & Practical Lab Skills
- Clinical Rotations (Hours, Competencies & Internship)
- Professionalism & Attendance

The specific requirements are detailed under the subheadings below.

Generally, performance levels for each student are made available via a number of sources, including: Blackboard, FISDAP and the Course Website. Students are responsible to monitor their own performance within the three categories and they are encouraged to meet with the Course Director to discuss their specific situation, their position relative to the class as a whole and to establish strategies to improve performance and behavior.

When a student is not making satisfactory progress in the course a warning notification may be issued. The warning notification is not a required step prior to a recommendation for probation or termination;

however, it should be an indication to the student that changes should be made in their performance or behavior.

When a student fails to meet the required progress objectives following a warning notification a recommendation for probation may be made to the Dean. The recommendation for probation is not a required step prior to the recommendation for termination but it should be considered as a final opportunity to make significant changes in their performance or behavior.

When a student fails to meet the Minimum Course Requirements a recommendation for termination will be made to the Dean.

Students may withdraw voluntarily from the program at any point before termination. Withdrawal is a voluntary action taken by a student; therefore, it cannot be appealed. Typically, a student may not withdraw from the program after the termination has been approved by the Dean.

Academic Standards & Practical Lab Skills

Academic Standards & Practical Skills is one of the three elements that form the Minimum Course Requirements. In order to successfully complete the paramedic program a student must pass all of the exams listed in the Examinations (Summative Assessment) section below.

Students are encouraged to utilize all available program and university resources to be successful in the program. At any time during the program, students should feel free to contact the University Academic Success and Tutoring Center. At the center, skill-based peer tutors help students develop and enhance their academic success strategies in areas such as time management, studying, goal setting, and using campus resources. They do not tutor specific courses, but instead tutor students on academic success strategies and behaviors that can be used in any class.

Within Division 1, any student that fails a quiz will be required to schedule and attend an appointment or appointments with a member of the Academic Success and Tutoring Center in an effort to improve the students performance.

A student who fails one or more of the listed examinations will be recommended for academic probation. With the exception of Division 1, retests of a failed division examination will be held near the end of the course (see course schedule). A student who fails an examination retest will not be allowed to take other retest exams that may be required and will be recommended for termination from the program. Students who fail 4 or more division examinations (excluding Division 1) will not be eligible to take any retests. There is no retest of the Final Comprehensive Examinations.

Retests for Division 1, Preparatory, will not be delayed. Students who do not end the division with a passing Preparatory Division Quiz Average (passing = 75%) and fails the related retest exam or fail the Preparatory Final and the related retest will be recommended for termination. Depending on the timing of this event, the student may be entitled to a partial or full refund. See Payments, Withdrawals & Refunds section for more information.

A student who fails one or more of the listed practical skills will be recommended for academic probation. A student who fails a retest of a failed practical skill will be recommended for termination from the program. Remediation practice will be provided prior to retest. The student will be told only that they passed or failed the skill, specific scores or reason(s) for a fail will not be provided.

Students are NEVER allowed to copy, duplicate, or photograph (including a handwritten record of test items) any quiz or exam. Any attempt to do so may be considered academic dishonesty and an immediate recommendation for termination may be made.

Examinations (Summative Assessment)

Examinations are summative assessment tools. The goal of summative assessment is to measure the level of success or proficiency that has been obtained at the end of an instructional division and at the end of the course by comparing it against an established standard.

Examinations are pre-scheduled and any changes to the schedule will be announced. At the discretion of the program director the grades of other assignments such as papers, presentations, assignments, and homework may count as an examination. With the exception of Division 1, Summative Assessment Examination are testing items, not teaching items, therefore, they are not reviewed and results are provided as Pass/Fail without specific scores.

- Preparatory Quiz Average
- Preparatory Final
- Airway Management & Ventilation Final
- Trauma Final
- Cardiology Final
- OB/GYN Peds Final
- Medical Final
- Operations
- Advanced Cardiac Life Support
- Pediatric Advanced Cardiac Life Support
- Basic Life Support for Healthcare Providers (CPR)
- Final Comprehensive Examination (May include multiple exams, No retest)

Quizzes (Formative Assessment)

Quizzes are formative assessment tools. The goal of formative assessment is to gather feedback that can be used by the instructor and the students to guide improvements in the ongoing teaching and learning context.

The subject matter of a quiz may include current topics covered earlier in the program. Quizzes occur frequently throughout the course. While many quizzes are scheduled, additional ad-hoc quizzes can be held at any time and without notice. For the purposes of calculating an average score quizzes are grouped by division. At the discretion of the program director, quizzes may be weighted when calculating averages.

With the exception of Division 1, Preparatory, quiz grades are not used to determine the student's academic standing in the program.

Quiz Review (formative)

Written quiz results may be reviewed during which time students will have the opportunity to examine their performance. At the discretion of the Program Director this review may be conducted in class with the group or during an office visit with individual students.

There will be no review of re-tests, tests rescheduled following a student absence/late arrival, open-book tests, final exams (Summative Assessment Exams) or challenge tests. Adjustments or changes to test results may be made by the program director as deemed necessary.

All quiz material must be immediately returned to the proctor at the end of the review.

Re-Score Request

This section only applies to paper-based (non-computerized) quizzes and exams.

If the student believes there has been an error in the score of a paper-based test a rescore request may be made. Such a request will be considered by the Course Director. The request must be made by email and contain the number of points by which the student believes the test to be in error.

In the event an error is found the test score will be adjusted accordingly. If no error is found, a score reduction equal to the number of points stipulated in the rescore request may be applied.

Final Comprehensive Examination

The Final Comprehensive Examination, often referred to as the Course Final is conducted near the end of the course. It will consist of one or more component exams, each exam will be listed on the course schedule. The results of the Final Comprehensive Examination will be released after the student has completed all of the component exams. The results will be presented as Pass/Fail. There is no retest opportunity for the course final. A result of Fail means that the student has failed the course.

Only those students who have met Minimum Course Requirements may take the Final Comprehensive Examination

Written Test Taking Conduct

The following rules are designed to maintain the integrity of the written test-taking process. Failure to comply with these rules may result in penalties; such penalties will be at the discretion of the Program Director and may include a reduction in test scores and/or a loss of professional points under the Professionalism & Attendance section of the Minimum Course Requirements.

Dishonest conduct may result in termination from the program. Please refer to the Academic Dishonesty section of your School of Health Technology and Management Student Orientation Handbook for more information.

- Seating assignments will be announced and are required to be maintained throughout the test.
- Students are required to be equipped with the appropriate equipment. A #2 pencil will be needed to correctly complete the Scantron forms used in the program. When ink is used color will be limited to black and traditional royal blue. Test documents completed in other colors may not be graded.
- Desks must be clear of materials except those specifically required and authorized by the proctor at the beginning of the test.
- The use of electronic or mechanical equipment, including but not limited, to calculators, handheld computers, cell phones, calipers, heart rate calculators, reference charts, etc. is prohibited unless specifically authorized by the proctor at the beginning of the test.
- The use of a single blank sheet of paper may be allowed at the discretion of the proctor. If used, the paper must contain the name of the student and must be submitted along with the other test-taking materials at the end of the test.
- Scantron forms must be accurately completed including the student's name, identification number, test form, test title, etc. Unless otherwise instructed, multiple-choice questions are answered by filling in the corresponding circles completely. Written answers are usually placed on the back of the form. The student should read or listen carefully to the instructions provided at the beginning of the test. The Scantron form must be readable by the scoring machine.
- Question sheets or booklets are to be marked with the student's name and must be returned along with other test-taking materials at the end of the test. Writing on the question booklets is usually permitted unless specifically prohibited.
- The time allotment for taking the test will be announced at the start of the process. The proctor may, but is not required to, announce time points throughout the test-taking period. The student is required to stop writing immediately when the proctor announces the end of the test. No additional writing is allowed after this point until all required test-taking materials have been submitted.
- Communication between students during the test-taking period is prohibited. Individual students may consult with the proctor; a raised hand will indicate a need to do so; however, the proctor will not provide any interpretation of questions or instructional assistance of any kind.
- Short restroom breaks are allowed; however, only one student may be out of the room at a time. All test taking material and communication equipment must be given to the proctor before leaving. The student must go to and directly return from the restroom facilities. Communication with other people during this time is prohibited.
- New York State and the National Registry have established their own rules of conduct which should be followed when taking their respective examinations.

Practical Skills

Practical skills testing is scheduled throughout the program and is designed to assess the minimum competency to carry out both basic and advanced paramedic skills. The student is graded on a pass/fail basis. The skills that are tested will be listed on the course schedule and they include:

- Spinal immobilization (seated patient)
- Ventilatory management – adult
- Spinal immobilization (supine patient)

- Pediatric (< 2 years.) ventilatory mgmt.
- Bleeding control/shock mgmt.
- The dual Lumen airway device
- Intravenous therapy
- Dynamic cardiology
- Patient assessment (oral presentation)
- Static cardiology
- Patient assessment – trauma
- Pediatric intraosseous infusion
- Piggyback drip medication admin.
- IM/SQ medication admin.
- Blood draw
- BLS CPR Practical Component
- ACLS Practical Component
- PALS Practical Component

Laboratory sessions dedicated to the training of the above skills are identified on the class schedule as “Lab” sessions. Students are required to have the following items in their possession during the lab sessions:

- A complete set of NREMT skill sheets and NYS Piggyback Drips skill sheet. (See course website)
- Stethoscope
- Watch with second hand
- Notepaper and pen/pencil

ALL skills must be entered into the FISDAP skills tracker and the session closed within 24 hours to avoid an absence for that laboratory session.

Practical Skills Test Taking Conduct

The following rules are designed to maintain the integrity of the practical test-taking process. Failure to comply with these rules may result in penalties; such penalties will be at the discretion of the Program Director and may include a reduction in test scores and/or a loss of professional points under the Professionalism section of the Minimum Course Requirements.

Dishonest conduct may result in termination from the program. Please refer to the section of this document entitled Academic Dishonesty for more information on this issue.

- When waiting for a test-taking assignment students must follow the rules set by the proctor at the beginning of the test.
- The student must proceed directly to the testing station when called upon to do so. Upon completion of the test, the student will return directly to the waiting area and report to the proctor or practical test coordinator.
- A restroom break will be authorized by the coordinator. Restroom breaks are not permitted once a test assignment has been made. Students must plan accordingly.
- Unless specifically authorized communication between students during the test-taking period is not allowed. Discussion regarding lab station activities or test scenarios is strictly prohibited and will be considered academic dishonesty.

- Concerns, complaints, or comments regarding test-taking procedures must be made to the Program Director or his designee as soon as possible and in any event prior to the announcement of the test result. Such issues may not be relied upon as a mitigating circumstance after a test grade has been awarded.
- The use of plain writing paper on which to make notes during a practical test is allowed as long as the paper is marked with the student's name and the paper remains in the testing room following the test.
- Students must be adequately equipped to take a practical test. Minimum requirements include a stethoscope and a watch to accurately record a pulse or respiration rate.
- New York State and the National Registry have established their own rules of conduct which should be followed carefully when taking their respective examinations.

Clinical Rotations (Hours, Competences & Internship)

Clinical rotation hours, competences & Internship performance are monitored as one of the three elements that form the Minimum Course Requirements. Students are required to successfully complete and record a minimum number of clinical rotation hours and successfully perform and record a minimum number of competencies at various ambulance sites and hospital departments in order to graduate from this program.

CLINICAL HOUR REQUIREMENTS:

The below hours and locations will be the MINIMUM hours that a student needs to complete to move to the internship section of the program. These hours (and minimum competencies: patient ages, impressions, skills, diagnoses, etc) must be completed between September and the end of February.

NOTE- The administration reserves the right to assign additional hours to any student that is not making satisfactory progress in the clinical or Internship phase of the program. Those hours, when assigned cannot be dropped or changed.

- **40 hours NYC BLS Units**
- **240 hours Paramedic Ambulances- NYC/CT**
- **200 ED Hours**
- **Peds ED 16**
- **OR 16**
- **L&D 8**
- **CPEP (psych ED) 8**

- NICU 8
- CCU 8
- Burn ICU 8
- Phlebotomy lab 8
- Medical Control 8

Total Minimum Clinical Hours: 568

ALL PATIENT ENCOUNTERS ON ANY AND ALL CLINICAL HOURS AND INTERNSHIP MUST BE FULLY DOCUMENTED ON FSDAP WITH NARRATIVES.

Clinical/internship Rotations with missing or incorrect patient information will be considered failed.

Competencies:

During the clinical phase of the program, (Sept-Feb) the following are the minimum ages, complaints, impressions, and skills that must be completed PRIOR TO STARTING THE INTERNSHIP: (subject to change)

Ages:

2 Newborns

2 Infants

3 Toddlers

2 Preschoolers

3 School Age

30 Pediatrics

50 Geriatrics

100 Adults

Complaints:

25 Abdominal Pain

12 Dizziness

10 Headache/Blurred Vision

35 Adult Diff Breathing

30 Chest Pain

20 Altered Mental Status

25 Change of Responsiveness

8 Pediatric Difficulty Breathing

12 Weakness

Impressions:

30 Respiratory

75 Medical
45 Trauma
15 Neuro
20 Psych
5 Cardiac Arrest
20 Abdominal
30 Cardiac
10 OB

Skills:

75 Medication Administration
20 Ventilations
40 IV starts
5 Live Endotracheal Intubations
50 Airway Management

Again, all above minimums, including hours, must be completed before moving to the internship section of the course.

The Internship is started when all core curriculum and above competencies have been completed.

All required competencies, with the exception of ALS Teamleads must be complete prior to the first day of the internship. Failure to meet this benchmark may result in termination.

Internship:

The internship shall consist of a minimum of 224 Hours on the NYC/CT Ambulances APRIL and MAY, And for some, in march- Students must document no less than 60 Team Leads during the internship and at least 30 of them must be ALS team leads.

Students that are short on competencies will be assigned shifts in all areas as needed (by the program) in March. Those shifts will be in the hospital(s) only. These student's internship will start in April an end in May

Students that have completed competencies in Feb will be allowed to start the internship in March on ambulances. These students internship will start in March and end in May

Our clinical partners and preceptors are graciously volunteering their time to assist the student in this phase of paramedic preparation. The preceptor should be viewed as a role model, teacher, and evaluator. Educationally rewarding internship experiences require the cooperative effort of the students and preceptors

Although conduct and professionalism are addressed in the policies and procedures of the program, students are reminded that their conduct and attitude should convey a message of serious interest in the care of the patient and the procedure performed. Confidentiality shall be respected. Any discussion of the physical or social life of patients, EMS personnel, or personnel from other assisting agencies is strictly unethical.

Constructive criticism and suggestions are welcome. If the student notices things that they do not understand or that is questionable, please talk to the person involved first. Additional clarification or information may be obtained from our administration and faculty. Please exhibit good judgment for the appropriate time to ask a question.

Objectives

During the field internship, the paramedic student should have the opportunity to gain experience and Develop proficiency in the following skills:

- Physical assessment, patient history, and documentation for all patients encountered.
- Recognize and react appropriately to scene/safety hazards.
- Vital and diagnostic signs: recognition and significance.
- Aseptic techniques and universal precautions.
- Peripheral IV insertion and drip rate calculations.
- Drug therapy: IV, IM, SQ, SL, ET, IO, and Updraft dosage calculations.
- Drug therapy: IV, IM, SQ, SL, ET, IO, and Updraft drug administration.
- The student will confirm all medications prior to administration.
- Cardiac arrest procedures.
- CPR
- Airway management
- Defibrillate/Cardioversion/External Pacing
- Pharmacology management
- Cardiac arrest team leadership skills
- Management of trauma, medical, peds, psychiatric, geriatric, OB/GYN emergencies.
- Airway management including the insertion of oral airways, suctioning, oxygen therapy, and oral/nasal endotracheal intubation.
- Use of cardiac monitors and interpretation of rhythms.
- Emotional support of patient and family.
- Use of IV pumps.
- Wound care and bandaging.
- Splinting of extremity fractures.

- Cervical immobilization and proper extrication.
- Didactic understanding and practical application of all BLS equipment carried on units.
- Didactic understanding and practical application of all ALS equipment carried on units.
- Opportunity to function as a team leader in no less than 30 ALS ambulance calls

STUDENTS MUST BE UNDER DIRECT SUPERVISION AT ALL TIMES.

Terminal Objective:

At the completion of the field internship, the paramedic student will be able to comprehend, apply and evaluate clinical information while demonstrating technical proficiency in all skills, behavior and affect necessary to fulfill the role as an entry-level paramedic.

Students that fail 2 field internship clinicals as determined by the Course Director and Medical Director for issues of Patient Safety, poor skills performance, documentation or affective issues will be recommended for termination.

Students are responsible to select all clinical and internship hours through the online scheduling program, www.fisdap.net. Periodically, instructions will be provided that will specify which rotation sites are open for selection, the number of rotations that may be selected at that time and other important information. All rotations selected by the student are subject to the approval of the Program Director. Rotation requirements may be changed, canceled or additional rotations and labs may be assigned by the Program Director if it is deemed necessary to do so.

Students must complete sufficient rotation hours each month to meet the overall requirements. When selecting rotations, the following criteria must be adhered to:

- During the BLS section, the student must successfully complete rotations from a minimum of 2 different BLS sites
- During the ALS section, the student must successfully complete a rotation at each available ALS site at least once
- During the Internship section, the student successfully complete a rotation at each available ALS site at least once
- Maximum of 16* consecutive hours
- Minimum of 8 hours rest time between rotations
- Unless stated otherwise All selections must be made prior to the 25th of the previous month
- All rotation hours (except internship) must be completed by the Rotation Period End Date listed on the course schedule

** 16-hour "doubles" must be completed on the same ambulance. Example 50W Tour 2&3 or the same hospital department.*

For details regarding the number of clinical hours reference the Hours Report available via the Course Website. For details regarding competency requirements reference your account at www.FISDAP.net

Rotation Drop Request Procedure

Extreme care should be taken when making rotation selections. Students are responsible to complete all rotations that they select or that are assigned to them. Students may request to drop a rotation via the FSDAP scheduling system. The drop request must be received no later than the 20th day of the previous month of the scheduled rotation. Drop requests should only be used to correct occasional errors in scheduling. Typical reasons for denying a drop request include, but are not limited to: Excessive number of requests, the length of time the shift is held prior to the drop request, etc.

Please Note: The rotation drop privilege is active only when the Program Director has approved such activation. The Program Director may deactivate or further limit this privilege at any time. Approval of a drop request is not guaranteed and may be denied for any reason.

Rotation/internship Evaluation Form

A rotation evaluation form must be completed immediately at the conclusion of the rotation. It is the responsibility of the student to have the correct form available and to completely and accurately enter all the information with the exception of the actual evaluation results which will be entered by the preceptor.

At a minimum the student is responsible to enter the following printed and legible information:

- Punch clock entries (USE AVS SYSTEM)
- Student name (printed)
- Student signature (certifying completion of rotation and accuracy of information)
- Date of rotation
- Rotation Site (example: SBUH, Winthrop, Lenox Hill Hospital, etc)
- Unit / Tour (example: 50W for ambulance / Burn Unit for hospital)
- Name of Evaluator (form will be rejected without a readable name)
- Number of patients (for ambulance & responder rotations only)
- Number of hours

FSDAP DOCUMENTATION:

In addition to the in-depth narratives that will be required on all patients seen and entered into FSDAP, **you must include, at the bottom of the CHART narrative, a comprehensive outline for each medication that the patient is taking and/or medication that you administered. This is to include oxygen and IV solutions.** This process will ensure that you have the needed familiarity with the medications your patients are likely to be taking as well as having the required mastery of the medications that you are going to be giving, most on your own volition.

The Information needed for the medication is as follows:

- Generic Name
- Trade Name
- Class
- Mode of Action
- Indications (all)
- Onset
- Duration
- Contraindications
- Adverse effects
- Interactions
- Adult Dose (include routes of Administration)
- Pediatric Dose (include routes of Administration)

Example:

Epinephrine/ Adrenalin

Class: Sympathomimetic

Mode of Action: Epinephrine stimulates alpha, beta1, and Beta2 in a dose-dependent fashion. It is the initial Rx of choice for treating bronchoconstriction and hypotension from anaphylaxis as well as cardiac arrests. It is useful for managing reactive airway disease as it antagonizes the effects of histamine and leukotrienes. It also results in an increase in BP, HR, cardiac contractility, and cardiac output.

Indications: Cardiac Arrest, Bradycardia, Anaphylaxis, Reactive airway disease, Hypotension/shock (other agents preferred initially)

Onset: IV- 1-2 Min

Duration 5-10 Min

Contraindications: Hypersensitivity, hypovolemia

Adverse effects: Headache, Nausea, Restlessness, Dysrhythmias, Angina, Hypertension

Interactions: Other sympathomimetic agents MAO inhibitors may potentiate the effects of epinephrine, Beta-adrenergic agents may blunt the effects. Administering in the same IV as alkaline solutions may deactivate the Epinephrine

Dose/Route:

Adult Dosage: Asthma/COPD: 0.3-0.5 mg IM Anaphylaxis: 0.3-0.5 mg IM; Infusion (1:10,000) 0.1 mg (1 mL) over 5 minutes IV/IO Symptomatic Bradycardia: Infusion 2-10 µg/min IV/IO Cardiac Arrest: 1 mg (1:10,000) IV/IO

Pediatric Dosage: Neonatal Resuscitation: 0.01 mg/kg IV/IO (0.1 mL/kg of 1:10,000) Max 1 mg; 0.01 mg/kg (1:1,000) IV/IO Max Dose 1 mg Bradycardia: 0.01 mg/kg IV/IO (0.1 mL/kg of 1:10,000); Infusion (1:10,000) 2-10 µg/minute IV/IO Asthma: 0.01 mg/kg (1:1,000) IM MAX dose 0.3mg Stridor: 0.5 mL/kg of 1:1,000, MAX of 5 mL, diluted in 3 mL NS Anaphylaxis: 0.15 mg (1:1,000) IM; Infusion (1:10,000) 2-10 µg/minute IV/IO Cardiac Arrest: 0.01 mg/kg (1:10,000) IV/IO; 0.1 mg/kg (1:1,000) IV/IO Hypoperfusion: Infusion (1:10,000) 2-10 µg/minute

Your rotation preceptor will provide an opinion on your performance. You are encouraged to discuss the evaluation results with your preceptor with a view to improving your skills as much as possible. If you disagree with your preceptor's evaluation you should discuss the matter with the program director. A failing report will be investigated by the program director to determine its validity.

Evaluations may not be accepted from preceptors with whom the student has a relationship other than that of student-preceptor. On ambulance rotations, this rule includes the paramedic partner on the crew. The best way to avoid a potential problem is with full disclosure; you should advise the program director as soon as you realize you know your preceptor. The program director will advise you on how to proceed.

The completed Rotation Evaluation Form hard copy is to be submitted to the clinical coordinator at the beginning of the next scheduled class following the rotation. The on-line skills record (FISDAP) must be updated and the shift "closed" or marked absent (if applicable) within 24 hours of shift completion. Failure to close a clinical/internship/lab/OOHS shift within the 24 hour deadline and/or failing to upload a scan of the skill sheet or Failure to submit the form at the next class will result in a professional point deductions for that clinical and no skill/ demographic FISDAP data or hours being accrued.

Students are strictly prohibited from contacting the rotation sites or the preceptors directly. All issues or problems must be brought to the Course Director immediately.

Attendance Verification System AVS (Field and Clinical Rotations)

Students must verify attendance when assigned to field and clinical rotations by calling the Attendance Verification System (AVS). Only calls initiated from a telephone that is physically installed or under the control of the rotation site will be accepted. The AVS phone number is (631) 729-1368. (Do not use this number to report an absence or late arrival). The specific procedure is as follows:

- The student will call the AVS from a rotation site phone upon arrival at a rotation site.
 - The call must be made between 45 minutes and 15 minutes prior to the scheduled start time.
 - If the call is made within 15 minutes or after the scheduled start time the student should also have made an anticipated late arrival notification as instructed below.
 - If the student is attending a double rotation that should be stated and a departure verification should be made at the end of the second shift.

In addition, please state:

“My temperature is/is not 100 degrees or higher”

“I have/have not tested positive for COVID-19 in the past 14 days”

“I have/have not come into close contact with someone who tested positive or had symptoms of COVID-19 in the past 14 days”

“I have/have not returned from travel to a restricted US state or level 3 destination in the past 14 days”

**“I am/am not experiencing any of the following as new or worsening symptoms:
Shortness of breath, new or worsening cough, body aches/muscle pains/chills, sore throat, new loss of taste and /or sense of smell, fatigue/feeling unwell, new or worsening headache, nausea, vomiting or diarrhea.**

- The student will call the AVS prior to departure from the rotation site.
 - The departure verification call must not be made prior to the scheduled end time. (Leaving early may result in a late or absence accrual)
 - If the departure verification call is made more than 15 minutes after the scheduled departure time the student must indicate a reason for the late verification on the recording AND call the Course Director at 631-403-0207.
- The student must make an advance call to declare an alternative lunch break and provide a justification for the change on the AVS when attending a hospital-based rotation (See Hospital Break Times below)
- When making the call the student must clearly state and record the following information on the AVS voice mail:
 - The students last and first name
 - The rotation site name (eg. “Flushing EMS” or “Stony Brook Hospital”)
 - The Ambulance number or department (eg. “52 frank tour 3” or “Cath Lab”)

- The schedule start or end time, depending on arrival or departure. And state if it is a double rotation.
- Alternative break time information if applicable
- The student should never call the AVS from any phone other than a rotation site controlled phone as described above (personal mobile phones are never accepted)
- If the phone being used does not allow the call to be made call the hospital operator and ask to be connected or find alternative acceptable phone
- If circumstances do not permit the student to follow the above procedure a call should be immediately made to the course director at 631-403-0207
- Students who do not make an acceptable verification calls as required will receive an absence and may also be subject to sanctions up to and including termination from the program
- If the attendance is not verified to the satisfaction of the course director the rotation may have to be repeated

Hospital Break Times

Break times during hospital rotations should be limited to a maximum of half an hour to be taken at the following times:

- Morning shifts at 11:00am - 11:30am
- Afternoon shifts 6:30pm - 7:00pm
- Night shifts 3:00am - 3:30am

If an alternative break time is necessary the student must call the Attendance Verification System (AVS) in advance of the break and state the new times and a justification for the change. Break times cannot be taken with one hour of start or end time.

Professionalism & Attendance

Professionalism & Attendance is one of the three main elements that make up the Minimum Course Requirements. General professionalism is measured by observing the behaviors of the student. Observable marks of general professionalism include compliance with all policies of the university and paramedic program, attentiveness, honesty, integrity, punctuality, respectful interactions with faculty members, peers, and staff on campus and at practicum sites, working until assigned tasks are completed and of good quality, communicating effectively, dressing in proper attire, and exhibiting good interpersonal skills, including respectfulness and civility, and prudent use of social media technology. A lack of professionalism is measured by observing the opposite of such behaviors.

Professionalism Score

Each student is awarded 100 points at the beginning of the program. At the discretion of the Course Director, based on the student's actions, bonus points may be issued, or penalties assessed. The student must have 75 or more professional points in order to be eligible to take the Final Comprehensive Examination. Students may be recommended for termination when their professional score drops below 75. The professional score is available to the student online and the details that make up the grade are available by request.

Attendance

Excellent student attendance is paramount to success in the Paramedic Program. Attendance at all lectures and presentations is mandatory. Students are required to attend all lab sessions, clinical/field rotations, testing and retesting dates, counseling sessions, classes, assessment sessions.

A late arrival will be recorded when a student arrives less than 15 minutes prior to the scheduled start time of a clinical, field rotation or lab session. Students arriving at a clinical or field rotation after the scheduled start time may be sent home and an absence may be recorded. Arrival time is determined by the time stamp established by the Attendance Verification System (AVS).

The program director must be notified of all anticipated lateness and absences. Unless instructed otherwise, the notification must be made via a voice call to the program director's cell phone: 631-403-0207

- Absences from all scheduled activities and appointments require notification at least 1 hour prior to the scheduled start time.
- Clinical and /or field rotation lateness requires notification immediately the student realizes that on-time arrival is unlikely AND a follow-up notification immediately upon arrival. This is in addition to the AVS procedures. if the student leaves early for any reason a notification must be made directly to the Program Director prior to departure. This is in addition to the AVS procedures.

Failure to follow these notification procedures may subject the student to significant penalties up to and including termination from the program.

A limited number of allowances are made for unforeseen circumstances. See the table below.

Allowances	
All classes, Lab Sessions ,Video Based Instruction, Clinical & Field Rotations.	
Absences:	10
Latenesses :	10

- Students who exceed the above limits may be recommended for termination.
- Lateness will be recorded when a student leaves early from an event (less than 1 hour)
- An absence will be recorded is a student misses more than 1 hour of any event
- The program is not obligated to provide additional services to compensate for absences. even if the absence(s) results in the student not being able to graduate from the program. If additional services are provided there may be an additional cost to the student.