

Laramie County Community College
Paramedic Program



Paramedic Program Handbook
2021

Program Faculty	Page 3
Advisory Committee	Page 3
Program Goal/Objective	Page 4
Attendance Policy	Page 5
Grading Policy	Page 6
Clinical Overview	Page 7
Vehicular Overview	Page 7
Confidentiality	Page 8
Grounds for Dismissal	Page 9
Dress Code/Professional Conduct	Page 10
Other Info (supplies, fees, physical regulations, probation definition)	Page 11
Appeal Process	Page 12
Test Guidelines	Page 12
Student Signature Page	Page 14
Capstone Paper Requirements	Page 15
Paramedic Medications	Page 16
Scenario Based Learning	Page 20
Mission Statement and Core Values	Page 21
Clinical Handbook	Page 22
Clinical Rotation Guidelines	Page 24
Clinical Rotation Dress Code	Page 25
Clinical Preceptor Guidelines	Page 27
Vehicular Handbook	Page 28
Vehicular Rotation Requirements	Page 29
Vehicular Site Locations	Page 31
Field Internship Evaluation Rubric	Page 34
Preceptor Guidebook	Page 35
Preceptor Requirements	Page 37
Paramedic Student Expectations	Page 39
Confidentiality and FERPA	Page 40
Paramedic Program Leveling System	Page 41
Blue Level	Page 41
Yellow Level	Page 42
Green Level	Page 44
Red Level	Page 45
Preceptor Agreement	Page 46

Laramie County Community College is committed to providing a safe and nondiscriminatory educational and employment environment. The college does not discriminate on the basis of race, color, national origin, sex, disability, religion, age, veteran status, political affiliation, sexual orientation or other status protected by law. Sexual harassment, including sexual violence, is a form of sex discrimination prohibited by Title IX of the Education Amendments of 1972. The college does not discriminate on the basis of sex in its educational, extracurricular, athletic or other programs or in the context of employment.

The College has a designated person to monitor compliance and to answer any questions regarding the college's non-discrimination policies: Please contact: Title IX and ADA Coordinator, Room 205B, Pathfinder Building, 1400 East College Drive, Cheyenne, WY 82007; 307.778.1144; NDS@lccc.wy.edu. Contact information for the regional Office for Civil Rights is: Office for Civil Rights, Denver Office, U.S. Department of Education, Cesar E. Chavez Memorial Building, 1244 Speer Boulevard, Suite 310, Denver, CO 80204-3582, 303.844.5695, OCR.Denver@ed.gov.

In compliance with the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act, Laramie County Community College does not discriminate against students with disabilities. Efforts are made to arrange effective, reasonable accommodations for any qualified individual. The Disability Support Services (DSS) office at LCCC provides comprehensive, confidential services for LCCC students with documented disabilities. Services and adaptive equipment to reduce mobility, sensory, and perceptual concerns are available through the DSS, and all services are provided free of charge to LCCC students.

Paramedic Program Faculty Resources

Program Faculty	Program Role	Office	Cell
Dr. Doug Schmitz	Medical Director	307-778-1149	307-575-0187
Stephen Willoughby	Interim Program Director	307-778-1149	307-421-8651
Starla Mason	Dean, School of Health Sciences and Wellness (HSW)	307-778-1140	
Tara Ritchie	Administrative Assistant, HSW	307-778-1140	

Wyoming Office of Emergency Medical Services

Department of Health
6101 Yellowstone Road
Suite. 400
Cheyenne, WY 82002
(307) 777-7955

LCCC Paramedic Program Advisory Committee

<u>Name</u>	<u>Representation</u>
Dr. Doug Schmitz	Medical Director
Starla Mason	Dean, School of Health Sciences and Wellness, LCCC
Stephen Willoughby	Program Director, Emergency Services, LCCC
Chief Greg Hoggatt, NRP	Chief, Cheyenne Fire and Rescue
TJ Haws, NRP	2008 Graduate, Career FF/Paramedic
Mike Phelps, FP-C, NRP	2009 Graduate, Volunteer FF/Paramedic
Lt. Brice Jacobson, NRP	Lieutenant EMS, Cheyenne Fire and Rescue
Jason Lindsay, NRP	2011 Graduate, FF/Paramedic/Adjunct instructor
Derek Pollnow, NRP	2011 Graduate, FF/Paramedic/Preceptor
Cindy Osborne	Community Rep
Zack Fangman, NRP	2014 Graduate, FF/Paramedic/Adjunct Instructor
Mike Hotchkiss, NRP	EMS Division Chief, Laramie Fire
Luke Hawkins, NRP	2012 Graduate, FF/Paramedic Laramie Fire
Nick Siemens	LCCC Fire Science Program Director
Landin Smith, RN, EMT	CRMC ER Manager
Luke Meier, NRP	2012 Graduate, Colorado Paramedic Representative, Greeley FD
Gary Hansen, NRP	AMR Clinical Education/ Employer

Program Goal

The goal of the Laramie County Community College Paramedic Program is to prepare competent entry level EMT-Paramedics in the cognitive, psychomotor, and affective EMS learning domains.

LCCC has established a blueprint for academic success based on these four general education outcomes that are incorporated throughout the curriculum:

- **Learn Responsibly:** Students will learn responsibly by actively expanding their knowledge and skills.
- **Communicate Effectively:** Students will communicate effectively through a variety of methods and media.
- **Critically Think:** Students will effectively utilize problem-solving strategies and creative methods.
- **Collaborate:** Students will collaborate and build community with others by interacting in a diverse, complex and global environment.

The program curriculum is based off the National Highway Traffic Safety Administration (NHTSA) Paramedic Instructional guidelines. You can view these at:

https://www.ems.gov/pdf/education/National-EMS-Education-Standards-and-Instructional-Guidelines/Paramedic_Instructional_Guidelines.pdf. Along with the National Emergency Medical Education Standards (<http://www.ems.gov/pdf/811077a.pdf>).

Program Objectives

Upon completion of this Paramedic Training Program, the student will be able to demonstrate knowledge, understanding and skill competency in the following areas:

I. Overall Course Competencies/Objectives

- A. **Cognitive:** perception, reasoning, intuition, critical thinking
 - B. **Affective:** emotional process, interpersonal, feelings
 - C. **Psychomotor:** physical process, muscular activity
1. Patient Assessment (Adult and Pediatric)
 - a. Trauma
 - b. Medical
 2. Airway/Breathing Management
 - a. Endotracheal Intubation
 - b. Dual Lumen Airway Device (Combitube)
 - c. Needle Cricothyrotomy
 - d. Surgical Cricothyrotomy
 - e. Needle Thoracostomy
 - f. Automatic Transport Ventilator awareness
 - g. Pediatric Ventilatory Management
 - h. Rapid Sequence Induction ET (RSI)

3. Cardiopulmonary Resuscitation
 - a. Basic Life Support
 - b. Advanced Cardiovascular Life Support (ACLS)
 - c. Pediatric Advanced Life Support (PALS)
 - d. Synchronized Cardioversion
 - e. Unsynchronized Counter Shock (Defibrillation)
 - f. Dysrhythmia Recognition and Management
 - g. Transcutaneous Pacing
4. Immobilization Techniques
 - a. Spinal Immobilization
 - b. Seated Patient (Kendrick Extrication Device (K.E.D.))
 - c. Supine Patient (Long Board Immobilization)
 - d. Extremity Immobilization
 - e. Traction Splint
 - f. Long Bone Immobilization
5. Invasive Techniques
 - a. Peripheral Venous Access
 - b. Central Venous Access
 - c. Intramuscular Injections
 - d. Subcutaneous Injections
 - e. Adult Intraosseous Infusion
 - f. Pediatric Intraosseous Infusion
6. Blood Glucose Monitoring
7. Gastric Suction
8. Bleeding Control/Shock Management
9. Pharmacologic Intervention
10. Clinical Decision Making and Medical Judgment
11. Documentation and Communication
12. Standard Patient Care Protocols
13. Scene Management and EMS Operations
14. Neonatal Resuscitation Program® (NRP®)

Competency is gained by successful completion of weekly quizzes, unit exams, skill performance, and clinical/vehicular rotations. See grading policy.

II. Attendance Policy

A. Absences and Tardiness

1. Absences and tardiness shall not exceed 6 cumulative hours (per semester) without approval of the Program Director. If a student exceeds 6 hours in absence or tardiness, the Program Director in collaboration with the program committee will make the decision on the student's eligibility to complete the course. The program committee's decision is final.
 - a. **Tardiness definition:** the student is not present in the classroom or assigned area at the start of scheduled class time. All tardiness is accumulated in 30 min increments. Example: A student is 6 minutes late due to "car trouble". This is recorded as 30 minutes on the attendance record.

2. Students who contract a contagious disease during the course shall not participate in didactic, clinical, or vehicular activities until they provide written documentation from their physician that they are no longer contagious. Some special arrangements will be made to accommodate the students missed time due to an illness.
3. The Wyoming Department of Health, OEMS, LCCC and the Program Advisory Committee have established the minimum number of vehicular hours and types of calls that must be completed by each student enrolled in the Paramedic Program and all students **must complete** the necessary vehicular/clinical hours and competencies by the date specified in the course schedule.
4. Failure to complete required hours will require remediation and or will result in dismissal from the program. Remediation will be available for students who became ill or were injured during the program, or experienced other hardships. This determination will be made on a case by case basis by the Program Director. Call volume and internship location will also be considered. Students who simply don't schedule their time wisely and fail to meet the hour requirement will be dismissed from the program.
5. Per current OEMS rules and regulations, the ALS Training Program shall fail students who do not complete all course requirements within the course time. If the student does not complete all requirements within the course time, the student shall be considered ineligible to complete the course.
6. Students who are dismissed from, or fail the LCCC Paramedic Training Program may not be readmitted to the next cohort without approval from the Program Director and Advisory Committee. The Program Director must be notified in writing within ten, (10) business days of the desire to reenter the program with the next cohort. All decisions made by the Program Director and Program Advisory Committee are final.

III. Grading Policy

1. Homework/Examination due dates are listed in the course schedule and will take place in the exam lab, classroom and or online.
2. After each exam where remediation will be applicable, each student will remediate the missed questions with documentation of missed material needed for review. (EMSTesting Remediation)
3. The student's cumulative course grade will be calculated for each course based on total points.
4. Grades will be scored as follows:
 - a. 90-100% = A
 - b. 80-89% = B
 - c. Less than 80% = F (Fail)
5. **ACLS and PALS exams must be passed to continue in the program. Failing ACLS or PALS constitutes dismissal from the entire program.**
6. Additional projects, including written assignments, may be assigned at any time by the Medical Director, or Program Director. Adjunct Faculty may also assign homework as approved by the Program Director or designee.
7. Progress reports will be provided to the student as requested and detailed semester grade reports will be given the student at the mid-term and end of a semester. Students may access their grades online through Canvas at any time.
8. **Each course's total grade must be above 80% to continue in the program. If the students grade at the end of a course is less than 80%, the student will be dismissed from the program and receive a failing grade.**

9. **Late work will not be accepted except for extenuating circumstances.** The Program Director will review late requests and circumstances on a case by case basis and make decisions accordingly. If an emergency arises that prevents you from completing your work on time, please contact the Program Director within 24 hours so that arrangements can be made for you to keep up in the class. Failure to notify within 24 hours of a missed assignment voids any opportunity for an extension or other assistance to be awarded.

This late policy may be waived or modified at the Program Director's discretion in case of an emergency. Emergencies are defined as anything which is serious and unexpected. Emergencies cannot be written on the calendar in advance. Examples of emergencies are: heart attacks, car accidents, and a serious health crisis of the student or in the student's immediate family. Examples of non-emergencies are: family weddings, vacations, conferences or any other event which can be planned around. Proof of the emergency or extenuating circumstance will be required prior to an extension or other assistance being granted.

IV. Course Competencies: Clinical Overview

1. Clinical competency is confirmed by consistent preceptor evaluations reflecting standard or above standard performance.
2. Clinical competency categories include:
 - a. Knowledge base
 - b. Assessment skills
 - c. Patient management
 - d. Communication skills
 - e. Medication skills
 - f. Invasive skills
3. Clinical preceptors will evaluate and document the student's clinical performance as above standard, standard, below standard, or unacceptable.
4. Clinical preceptor evaluations reflecting below standard or unacceptable marks will result in follow-up by the Program Director or Medical Director with the clinical preceptor and will require student remediation.
5. At the discretion of the Program Director and/or Medical Director, remediation may include:
6. Additional required monitored clinical shifts
7. Evaluation by Paramedic Program staff
8. Evaluation by the Medical Director
9. Failure to demonstrate clinical competency by the scheduled start of vehicular internship may result in discipline up to and including placement on probationary status or dismissal from the program.
10. Clinical experience will be obtained **only when scheduled and approved** by the Program Director.
11. Schedule changes must have **prior approval** by the Program Director. The Program Director will inform clinical preceptors of changes, substitutions, or absences.
12. Students will contact the Program Director directly and immediately regarding any schedule changes, absences or tardiness.
13. Students who fail to arrive on time or are absent from a clinical appointment will be placed on probationary status. A second absence will result in disciplinary action up to and including dismissal from the program.

V. Course Competencies: Vehicular Overview

1. Each student must demonstrate mastery of the vehicular competencies as stated in the Preceptor guidebook before the scheduled conclusion of the program.
2. Vehicular competency is confirmed by:
 - a. Consistent preceptor evaluations reflecting standard or above standard performance
 - b. The preceptor's completion of the **Field Internship Final Evaluation** documenting the student's mastery of all vehicular competencies.
 - c. Completion of all levels and hours requirements as outlined.
3. Vehicular competency categories include:
 - a. Knowledge base
 - b. Assessment skills
 - c. Treatment/patient management
 - d. Communication skills
 - e. Scene management
 - f. Documentation
 - g. Professionalism
4. Vehicular preceptors will evaluate and document the student's clinical performance as above standard, standard, below standard, or unacceptable.
 - a. Vehicular preceptor evaluations reflecting below standard or unacceptable marks will result in follow-up by the Program Director with the student's vehicular sponsor and will require student remediation.
 - b. At the discretion of the Program Director and/or Medical Director, remediation may include:
 - 1) Additional required preceptor field internship shifts.
 - 2) Evaluation by Paramedic Program staff (may include ride-along).
 - 3) Evaluation by the Medical Director.
 - c. Failure to demonstrate vehicular competency by the scheduled conclusion of the vehicular rotation will result in removal from the program.
5. Vehicular experience will begin only after being approved by the Program Director and scheduled.
 - a. Students may NOT perform any advanced life support skills in the field before the scheduled start of the vehicular portion of the education program.
 - b. Skills performed during vehicular internship are limited to those approved by the Wyoming Department of Health, OEMS or CoEMS Rule 500 and/or the students Vehicular Medical Director/Protocols.
 - c. Students will obtain vehicular experience under the supervision of a Paramedic Program approved preceptor and/or agency approved preceptor.
 - d. Vehicular preceptors for paramedic students must be paramedics with current National Registry and or state certification, be in good standing with their agency, and having at least two years' experience as a paramedic is preferred. Preceptors must also abide by LCCC's leveling program as outlined in the Preceptor handbook.
 - e. Agency, schedule, preceptor changes, or substitutions must have prior approval by the Program Director.
 - f. Students will contact the Program Director directly and immediately regarding any changes, substitutions, or absences. Students who fail to arrive on time or are absent from a vehicular appointment will be placed on probationary status. A second absence will result in disciplinary action up to and including dismissal from the program.

***Please see Vehicular Handbook on page 28 and Preceptor Guidebook on page 35.

VI. Confidentiality

1. Given the nature of your training program, it is imperative that you maintain the confidentiality of patient information that received in the course of your training. It is necessary, in the rendering of patient care, that patients provide personal information. This information may exist in a variety of forms such as electronic, oral, written, or photographic material. All such information is strictly confidential and protected by federal and state laws.
 - a. Every Paramedic student must be sensitive about the importance of maintaining the confidence and security of all material he or she creates or uses that contains patient care information.
 - b. Every Paramedic student must be sensitive to avoid incidental disclosures to other healthcare providers who are not on a need to know basis. Pay attention to who is within earshot when you make a verbal statement about a patient's health information, and follow common sense procedures for avoiding accidental or inadvertent disclosures.
2. I understand that:
3. All hospital and EMS agency records are strictly confidential.
4. The privacy of patients cared for within these organizations must be assured.
5. I must abide by the ethics code for my profession, LCCC confidentiality policies, and the laws of the state of Wyoming and any other State I may be performing in.
6. I agree:
7. To respect every patient's right to privacy and not seek information about a patient unless I am involved in that patient's care.
8. Not to read or ask about the contents of any medical record unless it is directly applicable to my job or duties.
9. Not to disclose or reveal the contents of any patient's medical record to anyone who is not directly involved in that patient's care unless I have written authorization from the patient or designee.
10. Not to repeat or share any information about a patient that I might see or overhear while working at a hospital or EMS agency.
11. Furthermore, I agree:
12. Not to read or ask about the contents of any administrative or personnel record unless it is directly applicable to my role or duties as a paramedic student.
13. Not to disclose or reveal the contents of any administrative or personnel record to anyone who is not directly involved in working with that record unless I have written authorization.
14. Not to repeat or share non-public hospital or EMS agency information that I might see or overhear while working with these organizations.
15. My fellow student's experiences and performance are also confidential matters and are not to be discussed outside of LCCC.
16. I understand that any breach of patient confidentiality, or my failure to comply with the items listed above, may result in dismissal from the Paramedic Training Program, resulting in a failing grade.
- 17.

Grounds for Program Dismissal/Program Failure

A student may be dismissed from the Paramedic Program for any one of the following conditions: Failure to comply with the course and/or student policies as outlined above or in the following handbooks.

- Failure to complete each course of the paramedic program with an 80% or higher.
- Absences or tardiness exceeding 6 hours (per semester).
- Failure to maintain current EMS certification during the course of training.
- Failure to maintain current AHA Healthcare provider CPR certification during the course of training.
- Imbibing of alcohol, alcohol products and or drugs on school property or in the clinical or vehicular setting or while wearing any part of the LCCC Program uniform.
- Carrying of firearms or weapons on school property or in the clinical or vehicular setting.
- Inappropriate and/or unprofessional conduct, defined as, but not limited to:
- Failure to protect the privacy of the patient, patient's family, or the patient's records.
- Failure to use discretion when discussing laboratory, practical, didactic, clinical, or vehicular training.
- Performing any advanced life support skills other than during the approved/scheduled clinical or vehicular rotations approved by this Training Program. Student must have student badge and be in a “**Student role**” to perform ALS skills.
- Inappropriately representing LCCC Emergency Services
- Failure to comply with clinical or vehicular agency standards of procedures.
- Inappropriate or inadequate reporting of complaints, concerns or disconcerting situations to the Program Director.
- Causing or seeking to cause disruption, discord, or animosity among fellow students, participating agencies, or individuals during any phase of the education program (didactic, clinical, or vehicular).
- Falsification of any document used in the didactic, clinical, or vehicular portions of the education program.
- Failing PALS or ACLS
- Receiving a consistent score of 2 or less on lab/clinical/field affective evaluations and or unacceptable scores on the summative affective evaluation completed by the Director.
- Failure to display adequate and satisfactory educational progress throughout the program.

Academic integrity is expected of all students, especially those who are pursuing higher education in EMS. The below statement is included in all Paramedic Program Syllabi, and acceptance and understanding of these terms and conditions set forth below is demonstrated by continued enrollment in the Paramedic Program.

Academic integrity is the moral code or ethical policy of academia. This includes values such as avoidance of cheating or plagiarism and maintenance of academic standards. Maintaining academic integrity involves: creating and expressing your own ideas in course work; acknowledging all sources of information; completing assignments independently or acknowledging collaboration; accurately reporting results when conducting your own research or with respect to labs; and honesty during exams (LCCC Administrative Procedure 2.16P).

All LCCC students are expected to display appropriate conduct while on campus or attending college-sponsored activities. The College will take appropriate action for any demonstrations of academic dishonesty. Academic dishonesty is defined as a willful perversion of truth, or stealing, cheating, or defrauding in instructional matters. Students will have engaged in academic dishonesty if they copied the work of another without attribution, willfully allowed another to copy their work, falsified information, participated in unauthorized collaboration, obtained an examination prior to its administration, used unauthorized aid(s) during an examination, knowingly assisted someone else during an examination, submitted the work of another as though it were their own, reproduced unauthorized copies of tests or quizzes, and or committed other acts of plagiarism or actions deemed to be dishonest by the instructor.

The instructor and or Program Director reserve discretion in administering consequences for participating in any form of academic dishonesty. This may include receiving a failing grade for the assignment and/or the course, and up to being subject to dismissal from the Paramedic Program pursuant to the LCCC Student Handbook and the Paramedic Program Handbook.

Students have a right to appeal an academic process or sanction imposed on them and must follow the guidelines in the Program Handbook and the Academic Appeals Procedure 2.16P. Students have the right to appeal a student discipline process or sanction imposed on them and must follow the guidelines in the Program Handbook and the Student Discipline Adjudication Procedure 3.16P.

Laramie County Community College reserves the right to dismiss any student from the Paramedic Education Program for reasons of unsafe practices or for any other reason deemed detrimental to the student, LCCC or the State of Wyoming.

Note: A student may not perform ALS skills in a vehicular setting before Training Program approval, even though that student may be performing ALS skills in an approved clinical setting. A student who is doing clinical rotations and starting IVs in the Emergency Department cannot start IVs in an ambulance if vehicular rotations have not been approved to start by the Training Program. The student may not use ALS skills after all Training Program clinical and vehicular rotations are completed until the student is State and/or National Registry of EMT-P certified. This includes the time from course completion to receipt of the new level of certification card. Students must be aware that unless in an approved Training Program setting, the use of ALS skills constitutes practicing outside their scope of practice. This could cause the WY Department of Health, OEMS to pursue Administrative Action against that individual. Such action could result in a letter of censure, probation, suspension, or revocation of certification. (WYOEMS 2004)

All infractions will be investigated by the Program Director, and other college resources as required. Disciplinary action can include placement on probation and or an educational improvement plan, and up to and including dismissal from the paramedic program.

Dress Code/Code of Conduct

Didactic:

Dress during the didactic sessions is the LCCC Uniform T-shirt/Polo/Button down shirt and EMS pants with black boots. No bare mid-drifts or visible skin on the torso. No flip-flops or hats are to be worn in the classroom. The LCCC uniform hat is the only approved "hat" to be worn in class.

Clinical

Dress during the clinical sessions is as follows:

Dark colored pants - no jeans or shorts. (EMS Pants, black or navy blue)

Dark colored shoes/boots or clean work shoes.

No cowboy boots, sandals or nonstandard EMS uniform footwear.

No tank tops.

No hats or head coverings unless required by that area.

Boots/Shoes must be clean before reporting to any clinical area.

Paramedic Program Polo shirt or Class "A" uniform shirt

Some clinical areas will require you to change into "scrubs" before entering the area (operating room, recovery room, and nursery). In these specific areas, scrubs or disposable gowns will be provided for each student. Body piercings and tattoos shall be covered/removed in accordance with the agencies clinical/vehicular policies

Tobacco use:

No tobacco use, **of any kind**, in the classroom or during any clinical or vehicular rotation.

Smoking is allowed 30 feet from any campus entrance and is strictly enforced. Students will adhere to all clinical/vehicular site guidelines and rules regarding tobacco use.

This includes the use of all vapor producing devices.

Electronic Devices

All electronic devices will remain in the silent or vibrate mode during any classroom/lab session and throughout all clinical/vehicular rotations. Electronic devices may be used only on breaks.

Other important information

The requirements for paramedic certification are located in the Wyoming Department of Health Rules & Regulations W.S. 33-36-101, and can be found at the Wyoming State EMS office or website.

The Wyoming Department of Health, OEMS does not regulate or insure the financial viability of ALS Training Programs.

Each paramedic student must successfully complete all written and practical examinations, and all clinical and vehicular rotations, to be eligible for state certification.

A student enrolled in the Paramedic Program who is not able to meet the minimum requirements to graduate from the course as a paramedic shall not qualify to graduate as an EMT-Intermediate/AEMT. Each student must provide evidence of vaccinations and upload those vaccinations to CastleBranch. It is the responsibility of the student to ensure that all vaccinations are current upon submission and remain current and up to date throughout the training program.

Probationary status – A student is placed on "probation" for a variety of reasons. Probation is achieved by failing an exam, failing to show up a clinical or vehicular site, or for other violations of this handbook. If a student violates his or her probation by committing another "offense", the student will be removed from the program and receive a failing grade.

School and EMS Supplies

Books and personal school or EMS supplies are not provided.

Each student is **required** to obtain the following items for their personal use throughout the program:

One (1) stethoscope

One (1) pair of trauma shears

Organizational materials for student clinical/vehicular records

Additional Fees

The student is responsible for the required National Registry written examination fee as specified by NREMT application guidelines in order to obtain licensure at the conclusion of the program.

Should a physical examination or drug screening be required by a clinical area or vehicular agency before beginning a rotation in that area, the student will be responsible for any fees incurred.

Should a background check be required by a clinical area or vehicular agency before beginning a rotation in that area, the student will be responsible for any fees incurred.

The student is responsible for any/all cost relating to food, gas, lodging during clinical and vehicular rotations.

If the student fails out of the program the student will be responsible to reimburse LCCC for any prearranged travel costs. (plane tickets, hotel etc.)

Physical Activity Requirements

The ability to perform certain physical activities is a mandatory requirement for graduation.

Typical physical activities of a paramedic include:

Ability to communicate verbally via telephone and radio equipment

Ability to lift, carry, and balance 125 pounds independently and 250 pounds with assistance

Ability to interpret written, oral, and diagnostic instructions

Ability to use good judgment and remain calm in high stress situations

Ability to be unaffected by loud noises and flashing lights

Ability to function efficiently throughout an entire work shift, at times up to 24 hours, without interruption

Ability to read small print, such as on medication vials

Ability to accurately discern street signs and address numbers in the sunlight and at night

Ability to converse in English with coworkers and hospital staff as to the status of patients

Good manual dexterity, with ability to perform all tasks related to the highest quality patient care

Ability to bend, stoop, and crawl on uneven terrain

Ability to withstand varied environmental conditions such as:

Extreme heat, cold, and moisture

Ability to work in low light

Ability to work in confined spaces.

The inability to perform these activities may disqualify the applicant from graduation from the Paramedic Program.

Please reference the full Paramedic Physical Activity requirements document for all physical requirements of a paramedic.

Each student is expected to display appropriate conduct in classroom situations. LCCC may take appropriate action for any violation of the Academic Code of Conduct which includes, but is not limited to, plagiarism and/or cheating and the unauthorized acquisition or disposition, or other trafficking in exams, papers, or other class materials for which the student bears responsibility for originality.

Please reference the LCCC Student Handbook for the Academic Code of Conduct.

Appeal for dismissal must follow either Grade Appeals Policy 2.16P, or Student Discipline Adjudication Procedure 3.16P.

Failure by the student to complete the course for any reason shall in no way obligate Laramie County Community College to provide reimbursement of fees or tuition charges after the dates specified in the LCCC student handbook.

Testing Guidelines

Absolutely no talking.

All testing is to be done on an individual basis.

Before receiving the examination, the student will clear all books and other materials from his/her desk surface. All that will be needed are pencils. **Calculators are not permitted.**

The student is responsible for asking the Program Director or test proctor to clarify questions prior to or during testing.

Each examination has been allotted a specific period of time in which it is to be completed. No additional time will be granted. Refer to the enclosed course schedule for examination dates, subject areas, and time allocated.

The point value for each question is determined by the Program Director.

Upon completion of the examination, turn in the completed test to the Program Director or Test Proctor and leave the room. Students will not be allowed to reenter the classroom until all remaining students have finished or the amount of time allocated for the examination is used (whichever is first). The content of each written examination has been specified in the course schedule; however, ***knowledge of prior material may be assessed at any time, on any examination.*** Examinations will consist of any or all of the following formats: multiple choice, essay, short answer, fill-in, matching, diagram identification, etc. All examinations will be scored promptly and the student notified of the results. Examinations will be reviewed and points clarified as time permits. See exam center guidelines for further.

Signature page

This agreement shall remain in effect for the duration of the program. See next page, sign and remove the first night of class.

I, (print your name) _____, have read and understand the course requirements and the additional information contained in the student handbook.

I agree to abide by all of the conditions contained within the student handbook. I understand that I may be dismissed from the class for not conforming to the standards found within the student handbook. If I am dismissed from the program prior to the last day to withdraw, I may withdraw myself from the course in the Admissions and Records Office. After the last day to withdraw, dismissal from the program will result in an "F" grade in the program. Consult LCCC catalog for specific withdrawal dates. The program requirements have been explained to me by the Program Director. I will comply and I understand these requirements. Failure to comply with these requirements will cause me to be removed from the program and receive a failing grade.

Exposure Disclaimer

During the course of the EMT Training Program, students may be exposed to or asked to participate in situations that could possibly expose them to hazardous or infectious disease situations. Exposure may include the following:

Patients with infectious diseases (e.g., hepatitis, HIV, meningitis, herpes, tuberculosis, influenza, infectious mononucleosis, common childhood diseases)

Radiation from diagnostic procedures (e.g., portable x-rays)

Violent, physically abusive patients (e.g., drug overdose patients)

Before beginning the clinical portion of the EMT Training Program, make sure you are adequately protected against common communicable diseases such as mumps, measles, rubella, chicken pox (varicella), influenza, and others your physician deems important. Proof of immunization is required prior to starting any clinical rotation. LCCC is not liable for any illness or injury sustained during the program. Students may also be exposed to or asked to participate in situations they may consider distasteful or offensive. Exposure may include:

Patients, films, slides, or videos of individuals with severe injuries and bleeding

Dead and decomposed human bodies

Physically exhausting or demanding shifts

Lifting and carrying patients

I further understand and authorize the release of information to the State of Wyoming EMS Office. I am aware that Physical exercise and academy activities are part of the class. This agreement shall remain in effect for the duration of the program and rules and regulations in this handbook supersede all other LCCC rules, guidelines/ policies.

Sign

Date

Paramedic Medications**#1 (IV)**

IV Fluids-
 Normal Saline
 Lactated Ringers
 D5W (dextrose 5%in water)
 Hypertonic Saline (3%)
 Oxygen

#2 Resp/RSI)

Albuterol
 Aminophylline
 Decadron
 Duo-Neb
 Etomidate
 Fentanyl (RSI)
 Ipratropium Bromide
 Ketamine (RSI)
 Lidocaine (RSI)
 Magnesium Sulfate
 (Asthma)
 Methylprednisolone
 Midazolam (RSI)
 Nitrous Oxide
 Phenylephrine
 Propofol
 Racemic Epinephrine
 Rocuronium
 Terbutaline
 Succinylcholine
 Vecuronium
 Xopenex

#3 (Cardiac#1)

Adenosine
 Amiodarone
 Aspirin
 Atropine Sulfate
 Calcium Chloride
 Calcium Gluconate
 Digoxin
 Diltiazem
 Dobutamine
 Dopamine (Cardiogenic Sx)
 Epinephrine 1:10,000
 Furosemide

#4 (Cardiac#2)

Heparin Sodium
 Isoproterenol
 Labetalol
 Lisinopril
 Lovenox
 Norepinephrine
 (Levophed)
 Lidocaine/Lidocaine Drip
 Magnesium Sulfate
 (cardiac)
 Metoprolol
 Morphine Sulfate (cardiac)
 Nitroglycerin/Nitro Drip
 Procainamide
 Sodium Bicarbonate
 Vasopressin
 Verapamil
 Propranolol

#5 (Med/Tox)

Acetaminophen
 Activated Charcoal
 Amyl Nitrate
 Atropine Sulfate (HAZMAT)
 Bumetanide
 Dextrose (50%)
 Diazepam
 Diphenhydramine
 Dopamine (anaphylaxis)
 Epinephrine 1:1000
 Famotidine
 Flumazenil
 Glucagon
 Haldol
 Lorazepam
 Narcan
 Ondansetron
 Oral Glucose
 Promethazine
 Prochlorperazine
 Thiamine
 Pralidoxime

#6 (T-Pain)

Morphine Sulfate
 Fentanyl
 Diazepam
 Ketamine
 Ketorolac Thomethamine
 Mannitol
 Meperidine
 Nubain
 Dilaudid

#7 (OB)

Magnesium Sulfate (OB)
 Oxytocin

Scenario/Case Based Learning

You will be assigned various homework scenarios corresponding with the material in class through the spring/summer semesters. These assignments will be found on Canvas.

You must answer all questions within the scenario along with these additional two questions for each scenario –

Radio report. Type out your radio report to the ER for each scenario in the CHATT format. CHATT – Chief Complaint, History (pertinent), Assessment (vitals, exam), Treatment Provided, Transport ETA.

Narrative. Using the LCHART method, write a detailed narrative as you would for a patient care report.

Example – If there are nine questions embedded in the scenario, number 10 and 11 will be the questions above.

Each assignment will be graded as a homework score. All assignments will be “professionally complete” (typed and labeled appropriately) Answers should be detailed, robust and in a narrative essay format. One word answers are not acceptable! Put some thought into it and show me you are learning.

Assignment Example –

John Smith
1/1/2019
Scenario 1 Asthma Attack

1. Answer
2. Answer etc.
9. Radio Report
10. Narrative

LCCC Emergency Services Mission

To provide the community and region with competent, professional, entry level EMT- Paramedics

LCCC Emergency Services Core Values

Loyalty I will operate with integrity and support my fellow students and program

Courage I will have the courage to provide excellent care to all patients in all environments

Commitment I am committed to the Paramedic Program, becoming a Paramedic and lifelong learning

Competency I will strive to gain the knowledge and skills to become a competent provider

I understand and will operate under the LCCC Core Values throughout the duration of the Paramedic Program and my enrollment at LCCC.

Student Signature/date

Paramedic Program 2021

Clinical Internship Handbook



Hospital Location and Contact Information

Hospital	Address	Coordinator	Phone	Notes
Cheyenne Regional Medical Center	214 E. 23 rd St. Cheyenne, WY	Kerrie Twito	(307)-633-7364	
The Children's Hospital—Denver	13123 East 16 th Ave. Aurora, CO 80045	Jason Ketas	(303) 724-2593	No rotation due to COVID
North Colorado Medical Center WSBC	1801 16 th St. Greeley, CO 80631		(970) 350-6402	No rotation due to COVID
Medical Center of Aurora/Health One	Multiple locations in Denver area		(303) 873-5358	No rotation due to COVID
North Suburban Medical Center—HealthOne	9191 Grant Street Thornton, CO 80229		(303) 450-4516	No rotation due to COVID

Laramie County Community College Paramedic Program

Scheduled Clinical Areas

<u>Clinical Area</u>	<u>Hours</u>	
CRMC Emergency Room (124 hrs) CRMC Triage/Orientation (4 hrs)	128	
CRMC ED Behavioral Health Pod*	24 (as needed for SMC)	
CRMC Cheyenne Childrens Clinic*	24 (as needed for SMC)	
CRMC Cath Lab	8	No rotation due to COVID
CRMC ICU	12	No rotation due to COVID
CRMC Labor & Delivery	8	No rotation due to COVID
CRMC OR	16	No rotation due to COVID
CRMC Nursery	8*	No rotation due to COVID
Respiratory Therapy	6	No rotation due to COVID
Rapid Response	6	No rotation due to COVID
TOTAL	240	

May be based on actual competencies vs. hours that occur in other areas

For 2021, due to COVID, all Clinical hours will be completed in the ED. If Behavioral Health or Pediatrics patient contacts are not met in the ED, students will be assigned hours at CRMC ED Behavioral Health Pod* or CRMC Cheyenne Childrens Clinic*

Clinical Rotation Guidelines

Your clinical experience is an important part in your development as a Paramedic. You will be given opportunities for hands-on experiences in direct patient care. The development of a mature and professional attitude concerning patient care and interrelationships with other emergency personnel is necessary as an EMS professional.

During the hours of clinical observation and experience, you are a guest of the clinical institution and must strictly adhere to the following policies.

1. While in the clinical setting, you will only attempt skills that are within the scope of practice of a Wyoming/Colorado EMT-Paramedic and as directed and supervised by a Registered Nurse, Physician or other qualified professional. (Approved by WYOEMS and LCCC)
2. Student identification must be worn and be visible during every clinical session. The badge is to be worn at all times while in a clinical area. No pins or pictures are to be placed on/over your identification tag/badge.
3. Be courteous, considerate, and respectful of all staff, patients, patient's family members, and guests. Any deviation from this policy may be cause for immediate dismissal from the Paramedic Training Program.
 - a. Conduct yourself in a professional manner at all times.
 - b. You are responsible for maintaining the confidence and security of all material you create or use that contains patient care information. You must be sensitive to avoiding incidental disclosures to other healthcare providers and others who do not have a need to know the information. Patient care experiences during your clinical sessions are **strictly confidential**.
NOTE: Any deviation from this policy will be cause for immediate dismissal from the Training Program.
 - c. Smoking and eating will be allowed only in designated areas.
 - d. Potentially controversial subjects should be discussed only in private with your Preceptor, Program Director, or Medical Director. **ABSOLUTELY NO PHOTOGRAPHY AT ANY TIME!**
 - e. It is your responsibility to inform your preceptor of your whereabouts at all times during your scheduled clinical experience.
 - f. It is your responsibility to seek out appropriate educational experiences and use clinical time for educational purposes pertinent to the Paramedic Training Program. If there are no patients to be cared for you should be studying!
 - g. Leave the hospital clinical area if/when requested to do so by your preceptor.
 - h. You are not allowed to "chart" on an official patient record. You may co-sign on any procedures you perform.
 - i. Respond with a cooperative and cheerful attitude when requested to assist or participate with patient care or other appropriate duties.
 - j. Do not participate in any invasive or non-invasive procedure that is not specifically within the scope of practice of a Wyoming or Colorado EMT-Paramedic. (Observation is permissible)
 - k. Under **no circumstances** in any clinical area should you offer advice to any patient, family member or visitor regarding medication, diagnosis, nurses, physician, physician's orders, and/or treatment.

1. A Preceptor Evaluation Form, Clinical Hours Record, and Objectives specific for your assigned clinical area must be completed for *each* clinical rotation. At the conclusion of each session, you should review the day's activities with the Preceptor and allow the Preceptor to complete the forms. Documentation must be kept on the number of venipunctures, successful IV starts, intubations, and other ALS skills performed throughout your rotation as well as the time in and out of each area - signed by your Preceptor. This information must be accurate and legible.
- m. Specific objectives and requirements have been developed by LCCC for each clinical area. These objectives/requirements are enclosed. ***You must become familiar with this information before your rotation to that area.***

The Paramedic student will:

1. Take responsibility for scheduling/rescheduling through the Program Director.
2. Arrive to a clinical site on the date scheduled. A “no show” will result in disciplinary action up to dismissal from the program and the student will receive a failing grade.
3. Be self-directing to the point of readiness for all patient care, assessment, and communication but is careful not to display an overwhelming attitude. The value of your clinical rotation will largely depend on your eagerness to learn and the attitude you display to your Preceptor. Always keep in mind the agencies and program you are representing.
4. Report to the Charge Nurse in your assigned clinical area at the beginning of each clinical session. Students are required to remain in the assigned clinical area. The ONLY exception is to follow a patient to another area. (ex: leaving the ER to follow a pt. to the Cath Lab). The student will return to the designated clinical area immediately after the patient procedure has been completed.
5. Be punctual to all clinical sessions. Be aware that if he/she is late for a clinical rotation, he/she may be asked to leave and reschedule the clinical session.
6. Not leave the clinical area earlier than the scheduled time, (without prior approval). Failure to arrive on time or leaving the clinical area early is grounds disciplinary action up to and including dismissal from the Paramedic Training Program due to incomplete clinical requirements.
7. Have the appropriate clinical forms signed by the preceptor for **each** clinical session.
8. Go to meals or breaks as scheduled by the Charge Nurse or designee.
9. Park in designated areas as determined by the staff.
10. Notify the Program Manager as soon as possible of ANY problem that occurred during a clinical rotation.

Clinical Rotation Dress Code

The student will adhere to the following dress code during his/her clinical session.

Students will wear:

- Paramedic Program uniform. Uniform must be clean and neatly pressed.
- Appropriate PPE (Gloves, **Eye protection**) at all times.
- No blue jeans, white pants, skirts, scrub suits, or jogging suits are to be worn.
- No guns or weapons of any kind will be worn in the hospital setting.
- Shoes must be clean and shall not be canvas, high heeled, or sandal type.
- T-shirts or sweatshirts are not allowed except for program approved uniform.
- Shorts, caps, and hats are not allowed.
- Limit jewelry to post earrings, wedding band and wristwatch for safety reasons.
- A nametag or other identification indicating your first and last name must be worn and visible at all times.
- Tattoos will be covered in accordance with agency policy.
- Piercings – all visible piercings will be removed with exception of earrings.

Exposure Disclaimer

During the course of the Paramedic Training Program, students may be exposed to or asked to participate in situations that could possibly expose them to hazardous or infectious disease situations. Exposure may include the following:

Patients with infectious diseases (e.g., hepatitis, HIV, meningitis, herpes, tuberculosis, influenza, infectious mononucleosis, common childhood diseases)
Radiation from diagnostic procedures (e.g., portable x-rays)
Violent, physically abusive patients (e.g., drug overdose patients)

Before beginning the clinical portion of the Paramedic Training Program, make sure you are adequately protected against common communicable diseases such as mumps, measles, rubella, chicken pox (varicella), influenza, and others your physician deems important. Proof of immunization is required prior to starting any clinical rotation. The student must appropriately don all required PPE prior to any patient contact.

Students may also be exposed to or asked to participate in situations they may consider distasteful or offensive. Exposure may include but is not limited to:

Patients, films, slides, or videos of individuals with severe injuries and bleeding
Dead and decomposed human bodies
Physically exhausting or demanding shifts
Lifting and carrying patients

By signing below, I acknowledge I have been made aware of possible exposures during clinical and vehicular rotations and I accept the associated risks. **I will wear a minimum of gloves and eye protection with all clinical rotations.** If the situation requires more than the minimum PPE I will abide by the agencies policies concerning exposure protection.

If I am exposed to any potentially infectious material, I will immediately notify my supervisor/preceptor and the LCCC Paramedic Program Director. I will follow all agency protocols concerning exposures and I will document the incident for LCCC program record keeping.

Signature _____ Date _____

Print name _____

LCCC Paramedic Program Handbook

Clinical Preceptor Guidelines (Revised October 11, 2021)

1. Review clinical objectives with the student and discuss which objectives are to be included in the department activities. If you have any questions concerning specific skills or procedures, please contact LCCC Staff at 307-778-1149 or 307-275-2755.
2. Have the student sign in and determine his/her proper attire for the department, e.g., scrub top or complete scrub uniform.
3. Orient the student to the department, reviewing rules and operating procedures with the staff and define the student's role. Any special regulations concerning the student's activities should be defined.
4. Review with the student his/her clinical objectives and identify those skills applicable to the clinical area.
5. For each activity, demonstrate the skill initially, and then coach the student through the skill at least one time. Finally, observe the student as he/she performs the skill.
6. Observe the student when he/she is performing activities with the staff. The preceptor should review the student's technique and suggest corrections when appropriate.
7. Assist and evaluate the student until he/she is competent in each activity on the checklist.
8. Answer any of the student's questions concerning activities with the team or specific patients and their conditions.
9. Each student will have in his/her possession three forms that must be signed by the conclusion of his or her rotation in the department.
 - A. Clinical Hours Record - documents the actual hours spent in each clinical area by the student.
 - B. Clinical Objectives/Skills List. These forms document objectives and skills required by the LCCC for completion of the training program. (Additional skills performed but not required may be listed in the designated area on the form).
 - C. Clinical Rotation Evaluation – documents the students' performance in each area of competency. Please offer feedback on this form and discuss it with the student. Student and preceptor signatures are required.
10. All documentation initiated on a patient's record/chart, by the student, must be co-signed by the preceptor.
11. The student may administer medications by the oral, intramuscular, intravenous, intraosseous, subcutaneous, topical, and rectal routes under the direction supervision of a physician, nurse, or appropriate preceptor. Observation of a patient's reaction to a drug (whether administered by the student or other licensed person) should be noted by the student and documented as required. ***The Paramedic student may only administer drugs that are currently authorized by the scope of practice for Paramedics in the state the student is performing a clinical rotation.***

Paramedic Program 2019

Vehicular Internship Handbook



Vehicular Rotations

Purpose

Vehicular internship is designed to provide the student with an opportunity to synthesize the information and skills acquired during the didactic and clinical phases of the paramedic training program and apply them in a pre-hospital setting under the supervision of an experienced preceptor.

Vehicular Preceptor Qualifications

Your vehicular preceptor must:

Be a qualified paramedic from an affiliated agency/vehicular sponsor with current State certification and or National Registry certification, in good standing with said agency, and preferred Paramedic experience for a minimum of 2 years.

Possess working knowledge of Paramedic Training guidelines, LCCC Preceptor guidebook and current standards of care in the prehospital setting.

Vehicular Rotation Requirements

Before you may begin your vehicular rotation, a copy of your vehicular schedule clearly identifying the unit to which you are assigned, your preceptor, and dates of each shift must be provided to the Program Director. If subsequent changes occur to the schedule submitted, you **must** contact the Program Director and leave a message regarding that change (date of shift, preceptor name, unit assigned). Voice mail: 307-778-1149 or 307-275-2755.

The following requirements **must** be met during your vehicular rotation:

Your initial responsibilities during your vehicular internship should be that of an observer. After progressing through the levels outlined in the preceptor guidebook, you should eventually function as the patient care team leader. ***However, you should not be staffed in the position of being an essential part of the patient care team.*** At a minimum, you must be staffed as a third person on the emergency vehicle.

Since you have not yet been certified by the Wyoming Department of Health Services as a Paramedic, you are not authorized to provide any ALS patient care in the absence of your agency assigned (and training program approved) preceptor during your vehicular rotation.

Advanced life support (ALS) calls require that a base contact must be made to medical control. ***Paramedic students will operate under the agencies protocols to which they are assigned.***

When communicating with EMS and hospital personnel, clearly identify yourself as a paramedic ***student*** – **never** misrepresent yourself as a paramedic.

Medications, treatments, procedures, and techniques administered by the student are limited to those authorized pursuant to Wyoming Rules & Regulations W.S. 33-36-101 or Colorado BOM Rule 500, or the agencies protocols and medical direction.

Your preceptor must be present and observe **all** student-related patient care and co-sign the appropriate forms.

Documentation must include each and every skill performed (team lead, IV, medications, etc.).

Not documented = not done.

At the conclusion of each scheduled vehicular shift, ask your preceptor to complete a copy of the enclosed form entitled *Field Internship Shift Evaluation*. Your preceptor should assess your knowledge base, assessment skills, treatment and patient management skills, communication skills, scene management skills, and documentation skills when completing your final evaluation.

Your preceptor must sign **each line** of your hours and skills/patient experience record. **No blank lines**. A signature on a single line with an arrow (or equivalent) drawn below it will not be accepted. It is your responsibility to tactfully explain this program requirement to your preceptor and ensure your forms are properly completed.

Students will fill out a PCR for every call you are dispatched to (including refusals and transfers).

Vehicular Site Location and Contact Information

Agency	Address (HQ)	Contact	Numbers
American Medical Response, Cheyenne, WY	2542 Old Happy Jack Rd. Cheyenne, WY 82001		307-421-5228
Cheyenne Fire & Rescue	2101 O’Neil Ave. Room #304 Cheyenne, WY 82001	EMS Coordinator	307-638-4351 307-637-6320
City of Laramie Fire Department	P.O. Box C Laramie, WY 82073	Mike Hotchkiss EMS Coordinator	307-721-5332

You must demonstrate mastery of the vehicular competencies before the scheduled conclusion of the program. Vehicular competency is confirmed by consistent preceptor evaluations reflecting standard or above standard performance and the preceptor’s completion of the Field Internship Final Evaluation documenting the student’s mastery of all vehicular competencies and successful completion of all levels outlined in the preceptor guidebook. Vehicular competency categories include:

- Knowledge base
- Assessment skills
- Treatment/patient management
- Communication skills
- Scene management
- Documentation

Vehicular preceptors will evaluate and document the student’s clinical performance as above standard, standard, below standard, or unacceptable. Vehicular preceptor evaluations reflecting below standard or unacceptable marks will result in follow-up by the Program Director or ALS Coordinator with the student’s vehicular sponsor and will require student remediation. At the discretion of the Program Director, ALS Coordinator, and/or Medical Director, remediation may include:

Additional required precepted field internship shifts.
Evaluation by Paramedic Program staff (may include ride-along).
Evaluation by the Medical Director.

The Program Director will ride along with every student near the end of scheduled shifts to ensure competency.

Failure to demonstrate vehicular competency by the scheduled conclusion of the vehicular rotation or show sufficient progress throughout the vehicular rotation will result in disciplinary action, up to and including placement on probationary status and or dismissal from the program and the student receiving a failing grade. Remediation is reviewed and decided upon on a case by case basis.

Student Responsibilities

You must be familiar with all vehicular training objectives before your first scheduled shift to ensure you know what must be accomplished during this phase of your training.

Vehicular preceptor expectations of students vary considerably. Make a point to ascertain what is expected of you *early* in your interaction with your assigned preceptor.

Make an appointment to meet your Administrative Base Hospital Medical Director and Prehospital Manager and introduce yourself.

Be prompt and prepared when reporting for every scheduled shift.

Regulate your conduct in a positive, productive, and mature way.

Where applicable, perform a shift inspection of the emergency vehicle, medical equipment, test patch, and make note of any restocking needs of the vehicle or equipment.

Be thoroughly familiar with and follow all agency policies and practices.

Ensure your assigned preceptor signs (first initial, last name, title - i.e., A. Smith, NRP) all necessary forms at the conclusion of each shift:

Vehicular hours record

Vehicular skills/patient experience record

Team lead form

Vehicular evaluation form

The completed vehicular evaluation form must be attached to copies of all EMS run forms for the shift evaluated. Your documentation will be reviewed and the types/numbers of calls compared to your vehicular hours and skills/patient experience records to assure accuracy.

*See preceptor guidebook for further detailed information pertaining to vehicular requirements

LCCC Paramedic Program Handbook

FIELD INTERNSHIP **SHIFT** EVALUATION RUBRIC

KEY	4 Above Standard	3 Standard	2 Below Standard	1 Unacceptable
4 = Above Standard	Demonstrates above average knowledge and skill level. Consistently performs above expectations. Uses excellent judgment and thinks clearly. Shows a strong ability to identify patient needs and anticipate orders. Correlates patient presentation with clinical indicators. Strong communication and leadership skills. Consistently practices safely and within established policies/guidelines. Open to suggestions. Seeks ways to improve on his/her own.			
3 = Standard	Demonstrates average knowledge and skill level. Average performance of tasks. Uses good judgment. Determines need for treatments based on patient presentation. Carries out orders as requested. Good communication and leadership skills. Consistently practices safely and within established policies/guidelines. Accepts constructive suggestions.			
2 = Below Standard	Demonstrates below average knowledge and skill level. Inconsistent in performing tasks. Inconsistent in decision making. Occasionally cannot determine need for treatments based on patient presentation. Carries out orders with direction. Occasionally demonstrates communication and leadership skills. Usually practices safely and within established policies/guidelines. Appears to accept constructive suggestions but doesn't seem to fully understand reason or make changes.			
1 = Unacceptable	Poor knowledge and skill level. Frequently fails to perform tasks correctly. Fails to recognize patients requiring intervention. Uses poor judgment. Is frequently unable to interpret information based on patient presentation. Frequently fails to perform and carry out orders. Does not demonstrate communication and leadership skills. Does not practice safely or within established policies/guidelines. Takes constructive suggestions poorly and rationalizes mistakes.			

Laramie County Community College Paramedic Preceptor Guidebook 2021



**LARAMIE COUNTY
COMMUNITY COLLEGE**
Cheyenne ♦ Laramie ♦ Pine Bluffs

01/10/19

Dear Preceptor,

Thank you for your interest in the Laramie County Community College Paramedic program. Your dedication and commitment to EMS is honorable. Our students could not accomplish their goals without you. This program is continually growing and expanding, and with your expert feedback it will only get better. This year we have made a few changes we hope you will find helpful. The following guidebook will explain your role as a preceptor and your students' responsibilities to you.

Once again thank you for your continued dedication to our students here at LCCC!

Sincerely,

Stephen Willoughby
Program Director, Emergency Services
Laramie County Community College
307-778-1149 Office
307-421-8651 Cell

Contents

Section I – Preceptor Requirements and Responsibilities

Section II – What's in it for you?

Section III – Overall student expectations

Section IV – Confidentiality

Section V – Leveling Program

Section VI – Preceptor agreement

Section I

A. Paramedic Preceptor Requirements

The following are the minimum qualifications to be a Preceptor for LCCC's Paramedic Program:

1. Current NRP and/or State Paramedic Certification
2. 2 years field experience as a Paramedic
3. You must be in good standing with your State EMS office and or agency
4. Working knowledge of LCCC's leveling program
5. Current certification in CPR, ACLS, PALS
6. Signed copy of Preceptor agreement, copies of all certifications to

LCCC/Agency

B. Paramedic Preceptor Responsibilities

Be a role model and a mentor

Provide the student clear expectations

Consistently model professional behavior

Act as a patient advocate

Demonstrate an enthusiastic attitude towards EMS

Show respect for all agencies

Provide feedback as soon as appropriate to student

Familiarize student to your agencies policies and expectations and introduce student to ER staff,

Medical Director, and other members of your agency

Complete student evaluations in a timely manner

Stay in touch with LCCC regarding student progress

Contact appropriate LCCC faculty immediately in the event of an emergency

Be available to student for questions and guidance

HAVE FUN!!

Section II

A. What's in it for you?

We here at LCCC understand the time and commitment it takes to be a preceptor. Sometimes seeing the students succeed just might not be enough for your time. Depending on your agency, financial compensation may or may not be possible. LCCC wants to offer everything it can to keep our preceptors happy! The following are some benefits a preceptor may receive –

1. Continuing education credit
2. Program recognition (Board of Trustees and other governing bodies)
3. LCCC Adjunct Instructor teaching opportunities
4. LCCC Adjunct ID Card
(Admission to sporting events, discounts at book store, cafeteria etc.)
5. Agencies can receive credit towards reduced course fees for future enrollment

Section III

A. Overall student expectations

The following is what the Preceptor can expect from the student:

Reporting for shifts on time, 15 minutes early is preferred. If a student is running late, he/she is required to contact their Preceptor and LCCC faculty ASAP. More than one unexcused late arrival will result in disciplinary action taken by LCCC faculty.

“No shows” are unacceptable! Notify LCCC staff immediately if a student does not show up for duty or makes arrangements to reschedule. More than one “No-show” will result in disciplinary action up to and including dismissal from the program.

Students will exhibit professional manner at all times

Students will show up ready to learn

Students will show up for duty in LCCC's uniform, and have their student ID badge with appropriate leveling color visible. Any infraction may require the student to be sent home

Documentation is the students' responsibility. If the student arrives without the proper paperwork they are to be sent home.

The use of cell phones is prohibited. Cell phones are to be off while “on duty”. The student may make personal calls while on designated breaks set by the Preceptor.

Students must also follow all guidelines set forth in their student handbook/syllabus

Be familiar with State guidelines, Scope of Practice

Do not perform ALS procedures without Preceptor present

Section IV

A. Confidentiality

Paramedic students can be placed in some precarious and embarrassing situations during clinical rotations. In regards to maintaining a positive learning environment LCCC asks all Preceptors to maintain student confidentiality as well as patient confidentiality.

Students are to adhere to all HIPAA requirements as well as your agencies policies concerning confidentiality. Students are not to use patients name or date of birth on any student run reports or remove any patient identifying information from your agency.

An LCCC student is also protected under FERPA (Family Education Rights and Privacy Act). All student information regarding grades, performance, disciplinary action, financial aid, etc. is to be disseminated to LCCC EMS Faculty or appropriate personnel in your agency only. Frequently circumstances arise where information obtained by the Preceptor is sensitive in nature. In this circumstance, relay all information to LCCC EMS faculty directly. Document all critical matters carefully, (i.e. the student performs a dangerous action harming himself or the patient). Please stay in touch with LCCC EMS Faculty with any concerns or questions.

Section V

A. The Leveling Program

The following pages describe LCCC's leveling program. As each Paramedic student progresses through the program they are required to complete a field internship following a color coded scale. The colored levels take the student from EMT-B skills to full fledged Paramedic operations. This scale will help keep the students from "being thrown to the wolves". It is designed to add responsibility and improvement as the student progresses. Students shall perform 50% of vehicular shifts with their primary Preceptor. The breakdown of the levels is described below.

BLUE LEVEL

Shifts required = 1-2 12 hr. shifts
(dependent on student comfort level)

Student Tasks and Responsibilities –
Establish Preceptor expectations
Orientation to station, crew members, agency policies, geographical area
Observation of Preceptor managing ALS calls
Observation only!

Preceptor Tasks and Responsibilities –
Establish student expectations
Demonstrate proper management of ALS calls
Talking the student through procedures
Orient student to station, crew, area of response, agency policies
Orient student to equipment, position on vehicle
Orient your crew to the leveling program
Fill out student evaluation form at end of shift

Factors for Evaluation –
Punctuality, Attitude
Professionalism, Uniform, ID badge
Ability to follow directions
Familiarity with equipment

*To move from Blue to Yellow level, student must first feel comfortable and then notify Course Coordinator or Program Director.

YELLOW LEVEL

Shifts required = 7-9 12 hour shifts

(Dependent on call volume and opportunity for ALS skills)

Student Tasks and Responsibilities –

Perform skill or action delegated by Preceptor

Proper performance of BLS skills

Proper performance of ALS skills

Report findings to preceptor

Student will fill out LCCC EMS run reports on all calls

Student will not be given Team leadership responsibilities

Begin Contacting Medical Control/ER with patient reports, calling for orders

Restock medical supplies, prepare for next call

Preceptor tasks and responsibilities –

Perform assessment and manage treatment of patient

Delegate all skills to student (situation dependent)

Observe student performing skills and provide immediate feedback or correction

Inform your crew that scene times may be slightly longer due to student involvement, encourage their involvement

Do not sacrifice pt. care for a “teaching moment”

Student must perform ALS skills (listed below) in the field or with you in a lab setting

Fill out student evaluation form at end of shift

Factors for Evaluation -

Student must appropriately perform ALS skills in field or lab

Student must follow directions in a timely manner

Appropriate use of PPE, and equipment

Restocking and preparing for the next call

*The student must successfully complete the following skills in the field or lab setting, with their preceptor or LCCC EMS faculty before moving to Green level –

Endo-tracheal Intubation (Adult and Pediatric)

Naso-tracheal Intubation, Needle decompression

Intravenous access x 5

Cardiac Monitoring to include performing 12-leads, cardioversion, defibrillation, and pacing

Medication administration x 5

Once skills are mastered students will bring documentation to LCCC EMS faculty, then determination will be made if they are ready for Green level advancement. If for any reason you as the preceptor feels the student is not ready to advance, please contact LCCC EMS for remediation planning.

Yellow Level skills sign off sheet

<u>Skill</u>	<u>Date/Description</u>	<u>Preceptor/LCCC EMS Faculty sign</u>
<i>IV</i>		
<i>IV</i>		
<i>IV</i>		
<i>IV</i>		
<i>IV</i>		
<i>Med admin</i>		
<i>Med Admin</i>		
<i>Med Admin</i>		
<i>Med Admin</i>		
<i>Med Admin</i>		
<i>Needle Decompression</i>		
<i>Cardiac Monitoring</i>		
<i>12 Lead Application</i>		
<i>Pacing</i>		
<i>Defibrillation</i>		
<i>Cardioversion</i>		
<i>Nasotracheal Intubation</i>		
<i>Orotracheal Intubation</i>		
<i>Adult</i>		
<i>Pediatric</i>		

Student should attempt to perform all skills in the four to six shifts allotted for this level. If the call volume is low or not appropriate for these skills, the student may pass off these skills in a “lab” setting in front of Preceptor or LCCC EMS faculty.

GREEN LEVEL

Shifts required = 10-12 12 hour shifts (can proceed directly to Red level based on student experience)

Student Tasks and Responsibilities –

- Take a team approach with preceptor in treatment plan and scene management
- Begin patient assessment, history, and examination
- Perform BLS and ALS skills when appropriate
- Begin to tactfully delegate procedures to crew
- Confirm delegated tasks have been completed successfully
- Report findings to Preceptor
- Ongoing assessment
- Contact medical control for orders and patient report
- Pass patient care to appropriate provider (ER, or other EMS agencies)
- Fill out LCCC run reports on all EMS calls

Preceptor tasks and responsibilities –

- Take a team approach to treatment plan and scene management
- Let student begin assessment
- Let student delegate BLS skills only
- Student should still perform all ALS skills if possible
- Intervene at any time in the call to help student if he/she is struggling
- Inform crew to allow student to delegate tasks to them
- Constructive criticism after every call
- Fill out student evaluation form at end of shift

Factors for evaluation –

- Scene management, Scene safety
- Consistency of mastered skills
- Appropriate interview, assessment and treatment plan
- Appropriate skill delegation and performance
- Appropriate Radio and personal communications
- Student fills out LCCC EMS run reports correctly and thoroughly

*The student must also pass the following tests to be considered for Red level advancement –

	Pass	Fail	Retest	Preceptor sign
Mega Code Scenario	_____	_____	_____	_____
Trauma Scenario	_____	_____	_____	_____
Medications	_____	_____	_____	_____

(Student must show a working knowledge of all agency EMS)

The tests can be administered by LCCC EMS Faculty or Preceptor. Student will provide documentation (calls, evaluations, tests) and set up a meeting with LCCC EMS Faculty to be considered for Red level. If for any reason you as the preceptor feels the student is not ready to advance please contact LCCC EMS for remediation planning.

RED LEVEL

Shifts required – 25 12 hr shifts (*no exceptions*)

Student Tasks and Responsibilities –

Red level students will function as entry level Paramedics

Work independently as a team leader

Proper scene management

Proper treatment plan, execution

Knowledge of protocols

Timely performance of interview, assessments, and skills

Continued mastery of Paramedic skills

Tactfully delegate procedures to crew and Preceptor

Contact medical control for orders and patient report

Pass patient care to appropriate provider (ER, or other EMS agencies)

Fill out LCCC run reports on all EMS calls

Complete 50 ALS “team leads”.

The student must demonstrate the ability to serve as a team leader in variety of pre-hospital emergency situations. Team Lead definition – ***Student leads the call and provides guidance and direction for setting priorities, scene and patient assessment and management without prompts.*** The team leader may not actually perform all the interventions, but may assign others to do so. Team leads must be of the ALS nature and the patient must have received an ALS intervention to count as an ALS team lead.

Preceptor tasks and responsibilities -

- The Preceptor and crew should not perform any intervention without giving the student a chance to delegate it (situation dependent)
 - Allow student to delegate skills to you if appropriate (at your discretion)
- Ensure student is providing care to the highest standards
- Provide in-depth criticism and praise after call
- Ensure thorough radio reports and patient reports to ER
- Ensure proper documentation on student run reports
- At no time will the preceptor leave the student alone with a patient
- Fill out student evaluation form at end of shift

Factors for evaluation –

As the student progresses through the Red level shifts, they should be able to function as an entry level Paramedic

Accurate protocols were followed, correct treatment plan

Skill mastery

Documentation and delegation

If for any reason you as the preceptor feels the student is not ready to advance, please contact LCCC EMS for remediation planning.

*At the end of Red level shifts, the student must present all paperwork related to vehicular shifts to LCCC EMS faculty. Any missing paperwork will require the student to make up the needed shifts. Students will remain on the Red level until the class final written and practical exams.

Section VI

A. Preceptor Agreement

I _____ have read and understand LCCC's Paramedic student leveling program. If I have any student concerns, problems or questions, I will contact LCCC EMS faculty immediately. I am committed to providing a quality street education to my Paramedic students.

Sign

Date