



Department of Health Professions

Emergency Medical Technician (EMT) and Advanced EMT Student Handbook, Clinical Handbook and Policy Manual



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WELCOME!

The Emergency Medical Technician (EMT) Program would like to welcome you to the program. We are glad that you have chosen this program to prepare you to pursue your career in this challenging field. Emergency Medical Services is an integral part of the healthcare field and qualified Emergency Medical Technicians are a valuable asset. The program is based on the NHTSA National Emergency Medical Services Education Standards.

Lawson State is committed to providing quality education, which will give our graduates professional credibility in their fields of study. To accomplish this goal, a unified program of study has been planned for you. Using a competency-based instructional framework, the program has been designed to help you develop essential entry-level skills. As an emergency medical services technician student, you will learn much as you develop into a healthcare professional. As professionals, we require a lot of ourselves and from you. In setting your goals for advancement, you must never forget that top safe quality patient care should be your first priority.

Classroom instruction and clinical education are scheduled by the Program Director/Instructor and are designed in a manner that allows didactic and clinical topics to be concurrent. The Clinical Instructors and Clinical Staff provide supervision and instruction to the students at the clinical education sites to ensure that the assignments are educational. At no time are students used as replacements for registered EMS or staff. The Clinical Education section of the Student Handbook outlines the plan for clinical education.

All students are provided with a *Student Handbook, Clinical Handbook, & Policy Manual*. This compilation has been prepared to guide you during your training. You are required to read it carefully and thoroughly to be sure you understand what is expected of you while enrolled in this program. The *Student Handbook* contains a description of: program policies & procedures, curriculum sequence, course descriptions, course schedule, program mission & goals, clinical education section, performance objectives, evaluation strategies, and the criteria for successful completion of competencies necessary for graduation. The *Clinical Handbook* section contains a description of the competency based clinical education portion of the program, policies of the clinical education centers, services available to the student, and clinical evaluation and competency objectives.

PROGRAM MISSION AND PHILOSOPHY

The mission of the Emergency Medical Technician Program at Lawson State Community College is to prepare individuals as competent emergency medical technicians who provide life support to clients experiencing pre-hospital emergencies and to prepare them to successfully write the National Registry of EMT Certification Examination. Our program philosophy is based on the belief that the emergency medical services technician is an integral part of the medical team and provides a vital service to the patient & the emergency physician and team by stabilizing the client at the scene and upon transport. The success of our students in learning the skills of hands-on training coupled with structured comprehensive instruction is our primary goal. The program, therefore, is committed to support the professional and personal development of each individual seeking this career.

EMS Curriculum

Dpt	Crs	Course Title	Theory	Lab	Clinic	Clock hours /week	Course Credit
ORI	101	Orientation to College	1	0	0	15	1
EMS	118	Emergency Medical Technician	6	3	0	12	9
EMS	119	Emergency Medical Technician Clinical	0	0	1	3	1
Term Total			7	3	1	30	11

Program Totals:

Total EMS Credit Hours:	10 Hours
Total EMS Contact Hours:	225 Hours
Total General Education Contact Hours:	15 Hours
Total Hours:	240 Hours

Advanced EMS Curriculum

Dpt	Crs	Course Title	Theory	Lab	Clinic	Clock hours /week	Course Credit
ORI	101	Orientation to College	1	0	0	1	1
EMS	155	Advanced Emergency Medical Technician	4	3	0	10	7
EMS	156	Advanced Emergency Medical Technician Clinical	0	0	2	6	2
Term Total			4	0	2	17	10

Program Totals:

Total EMS Credit Hours:	9 Hours
Total EMS Contact Hours:	240 Hours
Total General Education Contact Hours:	15
Total Hours:	255 Hours

Faculty and Staff

Robert M. Jackson, MS Instructor/Program Director

William Ferguson, MD Medical Director

PROGRAM PURPOSE

The purpose of the LSCC Emergency Medical Services program is to provide educational opportunities in how to respond to the sick and injured and to understand the processes behind the medical conditions of those in the communities supported by Lawson State Community College. To that end, the goals and objectives of the program and its curriculum are as follows,

PROGRAM GOALS

Upon completion of the LSCC Emergency Medical Services Program, graduates will be able to:

Goal 1: Comprehend the EMT's roles and responsibilities within an EMS system, and how these roles and responsibilities differ from other levels of providers.

Goal 2: Value the EMT's roles and responsibilities for providing emergency care.

Goal 3: Integrate complex knowledge of the anatomy and physiology of the body systems to the practice of EMS.

Goal 4: Use foundational anatomical and medical terms and abbreviations in written and oral communication with health care professionals.

Goal 5: Apply comprehensive knowledge of the pathophysiology of respiration and perfusion to patient assessment and management.

Goal 6: Comprehend fundamental knowledge of life span development.

Goal 7: Comprehend fundamental knowledge of public health systems.

Goal 8: Apply fundamental knowledge of medications used by EMT's.

Goal 9: Apply knowledge of airway anatomy and physiology to patient assessment and management.

Goal 10: Apply scene information and assessment findings to guide patient management.

Goal 11: Value the importance of a thorough and professional patient assessment.

Goal 12: Provide care for patients experiencing various medical emergencies.

Goal 13: Provide care for patients experiencing shock.

Goal 14: Provide care for patients experiencing various traumatic injuries.

Goal 15: Provide care for special patient population.

Goal 16: Demonstrate knowledge of operational roles and responsibilities.

PROGRAM GOALS

Upon completion of the LSCC Advanced Emergency Medical Services Program, graduates will be able to:

- Goal 1: Explain the Advanced EMT's roles and responsibilities within an EMS system, and how these roles and responsibilities differ from other levels of providers.
- Goal 2: Value the Advanced EMT's roles and responsibilities for providing emergency care.
- Goal 3: Use foundational anatomical and medical terms and abbreviations in written and oral communication with health care professionals.
- Goal 4: Integrate complex knowledge of the anatomy and physiology of the body systems to the practice of EMS.
- Goal 5: Apply comprehensive knowledge of the pathophysiology of respiration and perfusion to patient assessment and management.
- Goal 6: Apply fundamental knowledge of medications used by AEMT's.
- Goal 7: Value the importance of following policy and procedures for administering medications.
- Goal 8: Apply knowledge of airway anatomy and physiology to patient assessment and management.
- Goal 9: Apply scene information and patient assessment findings to guide emergency management.
- Goal 10: Value the importance of a thorough and professional patient assessment.
- Goal 11: Provide care for patients experiencing various medical emergencies.
- Goal 12: Demonstrate knowledge of operational roles and responsibilities.

FACULTY BELIEFS OF THE PROGRAM

The faculty's belief of the Emergency Medical Technician Program is that of a unified instructional program which offers the student the best opportunity for success. The course sequence has been planned with a consideration for the step-by-step development of the student and the integration of didactic course-work with clinical experience. The faculty strongly believes the EMT student must be able to work in a cooperative setting with other professionals in order to provide quality health care to the total patient. We feel that this individual must have a strong sense of loyalty, both to his/her profession and to his/her patients. He/She should also be encouraged to work continually to improve and advance the standards by which the emergency medical services profession is guided.

ACCREDITATION

T.A. Lawson State Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award associate degrees and certificates. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4800 for questions about accreditation of Lawson State Community College. The Emergency Medical Technician Program is approved by the Alabama Community College System and the Alabama Department of Public Health to offer the EMT and Advanced EMT courses. The program is not CoAEMSP accredited. Currently, LSCC EMT program is pending accreditation via the Alabama Department of Public Health Office of Emergency Medical Services.

[LAWSON STATE MISSION STATEMENT \(LINK\)](#)

[TUITION SCHEDULE LINK](#)

[LIBRARY SERVICES LINK](#)

STATEMENT ON DISCRIMINATION/HARASSMENT

The College and the Alabama Community College System are committed to providing both employment and educational environments free of harassment or discrimination related to an individual's race, color, gender, religion, national origin, age, or disability. Such harassment is a violation of Alabama Community College System policy. Any practice or behavior that constitutes harassment is a violation of Alabama Community College System policy and will not be tolerated. If you are being harassed by any persons on the campus of Lawson State, click on the Student Portal page or Quick Links page and report this concern/complaint immediately. Or, address the matter with your instructor immediately.

AMERICANS WITH DISABILITIES

The Rehabilitation Act of 1973 (Section 504) and the American with Disabilities Act of 1990 state that qualified students with disabilities who meet the essential functions and academic requirements are entitled to reasonable accommodations. It is the student's responsibility to provide appropriate disability documentation to the College. **Please contact the ADA representative**, Mrs. Renay Herndon, at 426-7335 (Bessemer campus) or Mrs. Janine McCoy-Jones 929.6396 (Birmingham campus).

NATIONAL REGISTRY

The National Registry of Emergency Medical Technician (NREMT) serves as the nation's EMS certification organization. As in any of the health related professions, it is advisable to be credentialed in your profession. Failure to become certified via the National Registry will make it very difficult to become employed & may hinder your career opportunities. The examination is given on computer any selected day or time at Pearson centers across the United States.

THE ALABAMA COMMUNITY COLLEGE SYSTEM

Emergency Medical Technician (EMT) and Advanced EMT Program

ESSENTIAL FUNCTIONS

The Alabama Community College System endorses the Americans' with Disabilities Act. In accordance with College policy, when requested, reasonable accommodations may be provided for individuals with disabilities. The essential functions delineated below are necessary for EMT program admission, progression and graduation and for the provision of safe and effective EMT care. The essential functions include but are not limited to the ability to:

Essential Functions for the EMS Program

Essential functions are required of persons entering and participating in the EMT programs. If you wish to enter one of the EMT programs, you must satisfy several special admission requirements. For admission to any of the programs, you must:

(Physical Demands)

- have the physical agility to walk, climb, crawl, bend, push, pull, or lift and balance over less than ideal terrain
- have good physical stamina, endurance, which would not be adversely affected by having to lift, carry, and balance at times, in excess of 125 pounds (250 pounds with assistance)
- see different color spectrums
- have good eye-hand coordination and manual dexterity to manipulate equipment, instrumentation, and medications (Problem-Solving Abilities, data collection, judgment, reasoning)
- be able to send and receive verbal messages as well as operate appropriately the communication equipment of current technology
- be able to collect facts and to organize data accurately, to communicate clearly both orally and in writing in the English language (at ninth-grade reading level or higher)
- be able to differentiate between normal and abnormal findings in human physical conditions by using visual, auditory, olfactory, and tactile observations
- be able to make good judgment decisions and exhibit problem-solving skills under stressful situations;
- be attentive to detail and be aware of standards and rules that govern practice
- implement therapies based on mathematical calculations

(Worker Characteristics)

- possess emotional stability to be able to perform duties in life-or-death situations and in potentially dangerous social situations, including responding to calls in districts known to have high crime rates;
- be able to handle stress and work well as part of a team
- be oriented to reality and not be mentally impaired by mind-altering substances;
- not be addicted to drugs or alcohol
- be able to work shifts of 24 hours in length
- be able to tolerate being exposed to extremes in the environment, including variable aspects of weather, hazardous fumes, and noise
- possess eyesight in a minimum of one eye correctable to 20/20 vision and be able to determine directions to a map
- Students who desire to drive an ambulance must possess approximately 180 degrees peripheral vision capacity, must possess a valid Alabama driver's license (if a resident of Alabama), and must be able to operate a motor vehicle safely and competently in accordance with State law

NOTE: The Alabama Infected Health Care Worker Management Act mandates that any health-care worker performing invasive procedures who is infected with human immunodeficiency virus (HIV) or hepatitis B virus shall notify the State Health Officer, or his designee, of the infection. The contact person for this reporting requirement is Ms. Charlotte Denton at (334) 206-2984.

HEALTH/BACKGROUND REQUIREMENTS

Each student accepted into the program is required to:

- 1) Complete the Health Form
- 2) Obtain all required vaccines
- 3) Complete required drug screen
- 4) Get a background check

These will be accomplished following the admission process prior to the program. Students may be subject to participate in random drug screens. All EMS students are individually responsible for obtaining adequate health insurance or for paying any bills incurred for medical treatment while on campus or clinical assignment.

ACADEMIC COUNSELING

The student is provided with academic counseling & guidance by program faculty. Scheduled academic counseling will be held periodically during the semester.

STUDENT SERVICES LINK

This includes information about a variety of resources for students including tutoring, financial aid, resources for students with disabilities and the student handbook.

COMPUTER RESOURCES

The Ethel Hall Health Professions Building on campus houses a computer lab which is open to Health Professions students to use for the sole purpose of supporting the educational activities of the college.

CLINICAL HANDBOOK

CLINICAL EDUCATION SITES

Clinical assignments may be conducted at:

Medical West- an affiliate of UAB Hospital

Grandview Medical Center

City of Bessemer Fire and Rescue

Regional Paramedic Services, Inc.

City of Birmingham Fire and Rescue

(The program/college reserves the right to add or delete clinical sites based on availability)

CLINICAL EDUCATION ASSIGNMENTS

Clinical education assignments may/will:

- Be concurrent with academic classes.
- Vary according to the students' progress in the program.
- May involve weekend rotations.
- Not be changed without approval by the Clinical Coordinator &/or Program Director.
- Not be switched with another student without Clinical Coordinator &/or Program Director approval.

CLINICAL EDUCATION AFFILIATE – RIGHT TO PARTICIPATE

The student agrees that, as a condition to participating in the EMT Program at the Clinical Facility, he/she will:

1. Participate in training covering the Clinical Facility's policies applicable to students;
2. Access, use & disclose protected health information of the Clinical Facility only as permitted under the Clinical Facility's HIPAA Compliance Plan;
3. Be governed as a member of the Clinical Facility's workforce for HIPAA purposes;
4. Be subject to sanction, including exclusion from using the Clinical Facility or prohibition against accessing Clinical Facility's protected health information, upon violation; &
5. Recognize that while at the Clinical Facility, the student(s) will be expected to adhere to administrative policies, procedures, standards, & schedules of the Clinical Facility.

CLINICAL EDUCATION – RIGHT TO PARTICIPATE

A student must meet the following criteria as designated by the program:

1. Complete the physical health examination administered by a physician
2. Complete all required vaccinations
3. Be certified in BLS for Healthcare provider's cardiopulmonary resuscitation (CPR). This certification must be good for the duration of the program.
4. Maintain liability insurance. Liability insurance is required to be purchased through the college & is included in tuition fees. Liability insurance is only in effect during clinical education that is assigned by LSCC. Student employment is not covered under this policy.
5. Attend all Orientations required by clinical site

EMT CHECKLIST

- _____ Physical examination performed by a physician or physician designee
- _____ Complete Student Health Form signed by a physician or physician designee
- _____ Criminal background check and drug screening from ESS
- _____ Emailed results of background check and drug screening to instructor
- _____ First shot in the Hepatitis B series or have completed the series
- _____ TB skin test or chest X-Ray ruling out tuberculosis
- _____ Flu Shot
- _____ Tetanus inoculation within the last 5 years
- _____ Have all immunizations up to date
- _____ Proof of health insurance coverage
- _____ Proper uniform and uniform appearance
- _____ Created National Registry account at nremt.org
- _____ Paid National Registry testing fee
- _____ Paid for BLS card

These are the required items that must be completed prior to the student being allowed to schedule any clinical shifts. The student must provide verification and have supporting documents for each item in the above list.

If a student has had a vaccine and cannot provide proof of having that particular vaccine then the student must have a titer analyzed and verified by their physician.

CLINICAL INSTRUCTOR ASSIGNMENTS

The Clinical Instructor will oversee the following activities:

1. Daily attendance, clinical instruction, and clinical evaluation for each student.
2. Assignments given to the student in the clinical education center.
3. Changes in the clinical schedule must be approved by the Clinical Coordinator & may be done for the benefit of the student's clinical education &/or in an effort to aid the clinical site.

EMS CLINICAL ROTATION OBJECTIVES

1. Each EMT student is required to complete 48 hours of clinical rotations with the specified EMS agency. The AEMT is required to complete 90 hours of clinical rotation with the specified EMS agency.
2. The EMT student is required to perform patient assessments of all patients.
3. The EMT student is to observe, assist, and perform the duties of the EMT scope of practice. At no time is the EMT student to violate the EMT scope of practice.
4. The EMT student is to observe and participate in the interaction between the patients and their medical providers as well as the interaction between healthcare providers.
5. The EMT student is to complete a Prehospital Care Report on each patient including non-emergency and cancelled calls as well as patient refusals.
6. Every student must have their preceptor fill out and sign a Clinical Rotation Evaluation Form. The forms must be submitted to their instructor by the start of their next class period.
7. Every student must have a complete Preceptor Evaluation Form for each clinical rotation.

CLINICAL EDUCATION – RULES AND REGULATIONS

1. Every student must operate in a safe, professional manner at all times. This includes operating in a manner that is also safe for the personnel, patients, and by-standers encountered during the clinical rotation.
2. Each student must complete the required number of clinical rotation hours prior to being allowed to take the National Registry Examination.
3. When a student is performing clinical rotations on an ambulance the ambulance must be an ACLS crew with a Paramedic. Student must complete the average of one emergency call for every 3 hours of the shift. It is the student's responsibility to make sure they are placed with the correct crews. Students are not allowed to schedule EMS clinical rotations on Sundays.
4. Students can choose either 8 or 12 hour shifts. Students are not allowed to schedule more than 12 hours in a 24 hour time period. If you are held over past 12 hours you must not exceed 16 hours.
5. No student is allowed to work anywhere 8 hours prior to the start of a clinical rotation shift.
6. Students must report to their clinical rotation site at least 15 minutes prior to the start of the shift.
7. Any student who is late for a clinical rotation will need to call their instructor prior to the start of their shift. At the instructor's discretion the student may or may not be allowed to complete their clinical rotation. If the instructor is not immediately available, the student will not be allowed to complete their clinical rotation.
8. Any student who fails to show up for an assigned clinical rotation will lose clinical points unless it is an excused absence. This includes failure to complete an assigned clinical rotation due to being late.
9. In the event the student's absence is unforeseen, the instructor must be notified immediately. If the absence is foreseeable the instructor must be notified 24 hours prior to the start of the clinical rotation shift.
10. In the event the student leaves or is dismissed from a clinical rotation before the end of the scheduled shift, the student must immediately notify the instructor. In either case, the consequences for not completing a scheduled clinical rotation will be the same as if the student was late or did not show up for the assigned clinical rotation.
11. In the event the student has a true family emergency during the clinical rotation they must first notify their instructor and seek permission to leave early. If the instructor is not immediately available the student is to use their best judgment regarding leaving.

12. It is the student's responsibility to schedule and reschedule their clinical rotations. Students are required to fill out the clinical rotation schedule form and obtain approval from the instructor prior to attending any rotation. Clinical rotation schedules are to be submitted a minimum of 7 days prior to the start of the clinical rotation. Any clinical rotation schedule submitted after the 7 day deadline will not be approved.
13. Students will display professional behavior at all times while representing Lawson State Community College. Student's conduct should also comply with the general policies that are listed in the Student Handbook of Lawson State Community College.
14. Students are to perform all skills and/or procedures within their scope of practice under the direct supervision of their preceptor until that preceptor believes that the student is capable of performing skills unattended.
15. The student is allowed to observe, assist, and perform the skills of their scope of practice unless prohibited by the policies of the clinical rotation agency.
16. All students should become familiar and comply with the policies and procedures of the agency assigned during the time of their clinical rotation.
17. The student will make sure that at all times they are mentally prepared to perform the duties of a medical professional. This includes but is not limited to: possessing the required knowledge and skills not being under the influence of intoxicating substances either legal, prescribed, or illegal, not having worked less than 8 hours prior to the start of the clinical rotation.
18. The student will ensure that they are physically prepared to perform the duties of a medical professional. This includes utilizing the body mechanics of lifting and moving patients in a safe manner. In addition, Students should be compliant with any prescribed medications.
19. In the event the student becomes injured, such as: has an accidental puncture from a contaminated source, is involved in a motor vehicle collision, or suddenly becomes ill, they are required to first seek medical attention and as soon as possible they are to notify the instructor. If the agency requires the student to seek medical attention from a specific facility, then the student must comply. If the agency does not require the student to seek medical attention from a specific facility, then the student must seek medical attention from any facility.
20. Every student must provide and document health insurance coverage. Prior to the start of any clinical rotation it is the student's responsibility to provide their own health insurance coverage.
21. Every student will comply with the uniform dress code outlined in the Uniform Dress Code Policies.
22. Every student will comply with the hygiene standards set by the Standards for Hygiene.

23. It is advisable for the student to bring one small bag with them to their clinical rotation site. This should contain pens, rainwear, sunblock, drinks, and a snack. However, the students should not eat or drink in patient areas or in direct view of patients.
24. Since most patients are required to have nothing by mouth students are not to allow or assist patients in eating and/or drinking unless specified to do so under the direct supervision of the preceptor.
25. When arriving for a clinical rotation use the designated parking area only. The student is responsible for any fees associated with parking.
26. If any situation, problem, or conflict not previously mentioned occurs, the student is to make every effort to contact the instructor immediately.

Students Name (**PRINT**) _____

Students Signature: _____

Date: _____

EMT UNIFORM DRESS CODE

1. While representing Lawson State Community College and/or any other agency during a clinical rotation every student will comply with the Uniform Dress Code. Failure to do so can lead to the student not being able to start or complete an assigned clinical rotation. The consequence for failing to complete an assigned clinical rotation is outlined in the Rules and Regulations.
2. The student's uniform will be clean, unstained, wrinkle free, and free from damage. Students are advised to bring an extra uniform in the event the student's uniform becomes wet, dirty, stained, or torn. The student's shirt is to be tucked in at all times.
3. The students will wear the gray shirt that is embroidered with the Lawson State Community College logo and navy blue EMS style pants that the students are required to purchase from Terry's Uniforms.
4. All buttons and zippers will be closed at all times. Only the most top button on the uniform shirt can be open at any time.
5. The student's footwear must consist of black uniform style shoes or boots with laces. The footwear must be worn and laced at all times. It is advisable that the student also wear thick, boot socks while wearing boots. The footwear cannot be tennis or running style shoes, be multicolored, slip on style shoes or boots, or non-protective.
6. The student must also wear a black belt with a small, regular sized belt buckle. The belt should remain fastened at all times and should be worn in such a manner that the student's pants remain in the position that they are designed to be in at the waist. No Sagging!
7. The student must also wear the appropriate, clean under garments.
8. The students must also wear a plain navy blue undershirt that is free from any lettering and/or logos. Undershirts are not to extend beyond the length of the sleeves. Under Armor and other similar styles of sport wear are not allowed to be worn.
9. Hair must remain behind the shoulders and ears at all times. Your hair should never interfere with your vision or hearing. Hair if dyed should be a natural color. Hair should be adorned in a conservative style. Hair colors not natural to human hair are prohibited.
10. Hats and sunglasses are not allowed at any time. However, toboggan hats and other similar styled headwear are allowed for winter months only. They must be solid black, blue, navy blue or gray and do not have a logo (except the Star of Life decal).

11. Every student must wear their Lawson State Community College identification at all times. It should be placed in the front and be visible at all times.
12. Males are not allowed to wear any makeup at any time. Females are allowed to wear small amounts of natural looking makeup.
13. Jewelry should always be a minimum. Earrings are allowed to be worn by females and should be small studs. Small necklaces can be worn but must remain inside the collar of the uniform at all times. The only rings that are acceptable are wedding bands that are free from sharp points. Visible body piercings including facial and tongue piercings are not allowed.
14. Tattoos should remain concealed either by approved clothing or tattoo concealer at all times.
15. During the winter months it is necessary to purchase a jacket and/or other clothing. You should get verbal approval of all winter clothing before you purchase items. EMS style jackets that do not have a logo (except the Star of Life decal) and solid colors that are black, blue, navy blue, and gray are all acceptable. Long sleeve uniform shirts will be available for students to purchase.
16. All attire must not contain logos unless it is either a Lawson State Community College logo or a Star of Life logo.

Students Name (**PRINT**) _____

Students Signature: _____

Date: _____

LAWSON STATE COMMUNITY COLLEGE

CLINICAL ROTATION SCHEDULE

Student: _____ Level: _____

Date: _____ Start Time: _____ End Time: _____

Facility and Station: _____ Approved / Denied by: _____

Student: _____ Level: _____

Date: _____ Start Time: _____ End Time: _____

Facility and Station: _____ Approved / Denied by: _____

Student: _____ Level: _____

Date: _____ Start Time: _____ End Time: _____

Facility and Station: _____ Approved / Denied by: _____

Student: _____ Level: _____

Date: _____ Start Time: _____ End Time: _____

Facility and Station: _____ Approved / Denied by: _____

LAWSON STATE COMMUNITY COLLEGE

EMT CLINICAL ROTATION EVALUATION FORM

Student: _____ EMS Agency/Hospital _____

Time and Date of Arrival: _____ Time and Date of Departure: _____

Did the student act in any manner that was unsafe for themselves or others? Yes / No

If answered Yes, please explain:

Did the student show up on time? Yes / No

Did the student arrive dressed in uniform? Yes / No

Did the student have any issues with hygiene? Yes / No

Did the student display a team attitude today? Yes / No

Did the student make themselves available to help today? Yes / No

Did the student use body substance isolation equipment appropriately? Yes / No

Did the student communicate effectively with all the patients during the assessment and treatment process? Yes / No

Did the student display knowledge and proficiency in:

Patient Assessment? Yes / No

Airway Management? Yes / No

Oxygen Administration? Yes / No

Hemorrhage Control? Yes / No

Medical Conditions related to EMS? Yes / No

Traumatic Condition related to EMS? Yes / No

EMS Operations? Yes / No

EMT Skills? Yes / No

If answered No to any questions, please explain:

COMMENTS: _____

Preceptor Name and Title: _____

Signature: _____ Time and Date: _____

LAWSON STATE COMMUNITY COLLEGE

CLINICAL ROTATION PROCEDURE VERIFICATION FORM

Preceptor Name and Title: _____

Signature: _____ Time and Date: _____

Student: _____ Location: _____

Skills

Body Substance Isolation:	Observed # _____, Assisted # _____, Performed # _____
Interact with Patients:	Observed # _____, Assisted # _____, Performed # _____
Patient Assessment Medical:	Observed # _____, Assisted # _____, Performed # _____
Patient Assessment Trauma:	Observed # _____, Assisted # _____, Performed # _____
Patient Lifting and Moving:	Observed # _____, Assisted # _____, Performed # _____
Oxygen Administration:	Observed # _____, Assisted # _____, Performed # _____
Airway Management:	Observed # _____, Assisted # _____, Performed # _____
Suctioning:	Observed # _____, Assisted # _____, Performed # _____
Obtained Vital Signs:	Observed # _____, Assisted # _____, Performed # _____
Obtained Patient History:	Observed # _____, Assisted # _____, Performed # _____
Hemorrhage Control:	Observed # _____, Assisted # _____, Performed # _____
Dressing and Bandages:	Observed # _____, Assisted # _____, Performed # _____
Spinal Immobilization:	Observed # _____, Assisted # _____, Performed # _____
Extrication of Patients:	Observed # _____, Assisted # _____, Performed # _____
Splinting:	Observed # _____, Assisted # _____, Performed # _____
Assist with Medications:	Observed # _____, Assisted # _____, Performed # _____
Patients Restraints:	Observed # _____, Assisted # _____, Performed # _____

Patient Management

Respiratory Distress:	Observed # _____, Assisted # _____, Performed # _____
Chest Pain or MI:	Observed # _____, Assisted # _____, Performed # _____
Stroke:	Observed # _____, Assisted # _____, Performed # _____
AMS:	Observed # _____, Assisted # _____, Performed # _____
Diabetic:	Observed # _____, Assisted # _____, Performed # _____
Seizure:	Observed # _____, Assisted # _____, Performed # _____
Overdose:	Observed # _____, Assisted # _____, Performed # _____
Abdominal Pain:	Observed # _____, Assisted # _____, Performed # _____
Anaphylaxis:	Observed # _____, Assisted # _____, Performed # _____
General Illness:	Observed # _____, Assisted # _____, Performed # _____
Shock:	Observed # _____, Assisted # _____, Performed # _____
Psychiatric:	Observed # _____, Assisted # _____, Performed # _____
OB/Gyn:	Observed # _____, Assisted # _____, Performed # _____
Pediatrics:	Observed # _____, Assisted # _____, Performed # _____
Geriatrics:	Observed # _____, Assisted # _____, Performed # _____
Environmental:	Observed # _____, Assisted # _____, Performed # _____
Respiratory Arrest:	Observed # _____, Assisted # _____, Performed # _____
Cardio Pulmonary Arrest:	Observed # _____, Assisted # _____, Performed # _____
MVA:	Observed # _____, Assisted # _____, Performed # _____
Assault:	Observed # _____, Assisted # _____, Performed # _____
GSW/Stabbing:	Observed # _____, Assisted # _____, Performed # _____
Fall:	Observed # _____, Assisted # _____, Performed # _____
Other Trauma:	Observed # _____, Assisted # _____, Performed # _____

COMMENTS: _____

LAWSON STATE COMMUNITY COLLEGE
EMERGENCY ROOM CLINICAL ROTATION
FOR EMT-B

Preceptor Name and Title: _____

Signature: _____ Time and Date: _____/_____/_____

Student's Name: _____ Location: _____

Rotation Date: _____, Arrival Time: _____, Departure Time: _____

Task	Minimum #	Performed	Assisted	Observed
Assessed Patients	12			
Body Substance Isolation	All Patients			
Obtain History	12			
Obtained Vital Signs	12			
Administered Oxygen	6			
Airway Management	6			
Bleeding Control				
Bandaging				
Splinting				
Patient Transfer/Movement	12			
CPR				
Assist With Medications				
Dialogue With Psych. PT.				

Preceptors Observations and Evaluations

YES

NO

Student Takes Accurate Blood Pressure		
Student Takes Accurate Pulse Rate		
Student Takes Accurate Respiratory Rate		
Student Can Proficiently Administer Oxygen		
Student Always Used Body Substance Isolation Procedure		

PREHOSPITAL CARE REPORT INSTRUCTIONS

At no time should the student attempt to obtain demographic information from patients. The students are further advised not to obtain signatures from patients and/or crew members for the purpose of classroom PCRs.

The student is instructed to fill out the entire PCR except for the black areas.

You are to fill out one PCR for every patient you have contact with including patient refusals. If you have multiple patients on a single call then you should have one PCR for each patient on that call.

For clarification: Unknown simply means the EMT student does not know that information. Not Assessed (NA) means that that aspect of the patient assessment was not assessed. Unable to Obtain (UTO) means a legitimate attempt of assessment was made but the results were unable to obtain. Not Performed (NP) means that the action was not even attempted. NA and NP should always be justified and should become a part of the normal assessment process.

All times should be documented using the 24 hour time method (Military Time) and all dates should be in the MM/DD/YYYY format.

All PCRs should be handwritten, legible, black ink only, and you should use a fine tipped pen. Gel pens, markers, and other similar writing instruments should not be used.

Students should skip the first PCR in this guidebook. You will have 20 other PCRs to complete. If you need more PCRs simply photocopy the blank PCR and turn them in with your guidebook.

PCRs should remain in chronological order.

If you need additional space to fill out a PCR you should use the back of the PCR you need to make additions to.

Every section of the PCR should have an indication of something even if the indication is unknown, not assessed, not applicable, none, or other. If you need to be more specific in your answers you can make justifications in the narrative section of the PCR.

How to fill out the PCR:

Page |

Service Name: Put the name of the service you are doing the clinical rotation at.

Incident Number: The first incident number should be 01; the second call for the day should be 02...

Date of Onset: Write the date of the first onset of symptoms that the patient has told you.

Date Unit Notified: Write the date of when you received the call.

Run Report Date: Write the date the PCR was filled out.

Dispatched For: Is nature for the call; the dispatcher gives you this information.

Times: Are typically obtained from the dispatcher but not for classroom purposes. You should keep track of the times that are required for documentation.

Arrived On Scene: The time the ambulance got to the scene.

Time Left the Scene: The time the ambulance left the scene.

Arrived At Destination: The time the ambulance got the transport destination.

The remainder of the times is insignificant for classroom purposes. Minutes For Response: The number of minutes it take to get to the scene. 911: If the call came from the 911 system then check yes. Minutes At Scene: The number of minutes you were on scene with the patient. Minutes For Transport: The number of minutes it take to get from the scene to the destination. Time Of Injury/Illness: The time of the first onset of symptoms. Gender: Male, Female, Unknown

Ethnicity/Race: Indicate the appropriate race and ethnicity for mat patient. Chief Complaint: Indicate the chief complaint of the patient. Injury/Illness Narrative: Indicate the broad generalization of the patient's condition. Past Medical History: List the patient's past medical history. Pertinent Findings on Physical Exam: You need to list signs and symptoms.

Allergies: Document allergies, if the patient does not have any allergies you need to document NKDA. Patient Medications: List all medications, dose, route, and times for all medications the patient takes. Emergency Medical Care Given: List all care given to the patient.

Patient Response to Emergency Medical Care: State the patient's response to all treatment. Provider Impression: Check all that apply to your patient. Destination: Is the destination of the facility you brought the patient to. Mode of Transport: What type of vehicle you used for transporting the patient. Destination Determination: Who or what determined the facility the patient was brought to. Clinical Information: Document the time and vital signs appropriately in each section. Respiratory Effort, Respiratory Sounds, Skin Perfusion, and Pupils: Check the appropriate box for each. Revised Trauma Score: Use the chart RTS Values to generate the RTS Score. Cardiac Arrest Information: Answer each question appropriately. Cardiac Rhythm: Fill this out only if the EMT was told the patient's cardiac rhythm. Date/Signature: The current date and signature from the EMT student.

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Service Name: Put the mane of the service you are doing the clinical rotation at.

Incident Number: The first incident number should be 01; the second call for the day should be 02...

Date of Onset: Write the date of the first onset of symptoms that the patient has told you.

Date Unit Notified: Write the date of when you received the call.

Run Report Date: Write the date the PCR was filled out.

Injury Matrix: Make all appropriate indications for all injuries to each area of the patient's body.

Cause of Injury: Check the box that is the most correct cause of the patient's injury.

Procedures: Document the times of when each procedure was performed along with the number of attempts

the procedure was attempted; who performed the procedure, and was the procedure was successful or unsuccessful. Medications: List the Medication given, time of administration, dosage, route, who administered the medication, and the patient's response to the medication. Scene Information: Indicate what best describes the scene. Factors Affecting EMS: Check all that apply. Lights and Siren: Indicate if you used or not used lights and siren to the scene and en route to the destination.

Page 3

Service Name: Put the name of the service you are doing at the clinical rotation.

Incident Number: The first incident number should be 01; the second call for the day should be 02...

Date of Onset: Write the date of the first onset of symptoms that the patient has told you.

Date Unit Notified: Write the date when you received the call.

Run Report Date: Write the date the PCR was filled out.

Treatment Authorization: Indicate how you were authorized to administer treatment.

Prior Aid: Indicate who performed treatment prior to arrival along with the treatment administered.

Safety Equipment, Human Factors, Injury Intent, Significant Exposure, and Exposure Precautions: Make all appropriate indications in each area.

Patient Disposition: Select the appropriate item.

Narrative: Keep in mind that each service will require different styles of narratives. At minimum you should describe events prior to arrival, describe the MOI/NOI, finding from the primary assessment, oxygen administration, SAMPLE history, OPQRST findings, vital signs, treatment and medications administered, response to all treatments, medications, and procedure, and all other relevant information.

When documenting MOI/NOI remember you need to relay enough information so someone reading this understands the events. These are just brief examples. For falls you should describe the height of the fall, body parts impacted, and the surface that was impacted. For gunshot wounds you should document the type of weapon used (handgun, rifle, shotgun), caliber of the projectile, range from the weapon to the injury, and number and location of injuries. For knives you should document the length of the weapon. For motor vehicle accidents you should document speed of the vehicle(s) involved, was any safety features used (seatbelts, airbags), location of damage to patient's vehicle and internal and external damage of the patient's vehicle.

Turned Care Over To: Typically you would get the signature of who you transferred care. For classroom purposes just indicate the title of the person who receives the patient (ex: RN, MD, and Paramedic)

POLICY MANUAL

ATTENDANCE

- Students are expected to attend all classes for which they are registered. Students who are unable to attend class regularly, regardless of the reason or circumstance, should withdraw from that class before poor attendance interferes with the student's ability to achieve the objectives required in the course. Withdrawal from class can affect eligibility for federal financial aid. Withdrawal from class can prohibit progression in Health Professions and allied health programs.
- Students are expected to attend **all** clinical rotations required for each course. Only excused absences will be considered for makeup. However, due to limited clinical space and time, clinical make up days cannot be guaranteed. Failure to complete clinical rotations will prohibit progression in Health Professions and allied health programs. Specific absences will be discussed per the instructor.

STUDENT PREGNANCY

Pregnant students must bring a written statement from their Obstetrician/Certified Nurse Midwife or OB-GYN Nurse Practitioner before registration each semester as to the ability to perform all expected Health Professions functions fully, safely and without jeopardizing the health or well-being of the student, fetus or patient. In order to resume her student EMT responsibility after delivery, the student must bring a written release from her Obstetrician/Certified Nurse Midwife or OB-GYN Nurse Practitioner. A written release of responsibility signed by the student must also be submitted to the Department of Health Professions.

POLICY ON ADVANCED PLACEMENT

http://www.lawsonstate.edu/admissions_records/admissions_information/ap_clep_and_ib_information.aspx

POLICY ON TRANSFER OF CREDIT

http://www.lawsonstate.edu/disclosure_and_consumer_information/general_institutional_information/transfer_of_credit_policies_articulation_agreements.aspx

POLICY ON CREDITS FOR EXPERIENTIAL LEARNING

http://www.lawsonstate.edu/admissions_records/admissions_information/ap_clep_and_ib_information.aspx

Lawson State Community College
Department of Health Professions
Policy on Bloodborne Pathogens

OSHA Compliance

Department of Health Profession students providing care to patients in the clinical/lab are at increased risk of exposure to various bloodborne pathogens.

The Occupational Safety and Health Administration (OSHA) have set up rules and regulations aimed at controlling the spread of bloodborne pathogens. In an effort to comply with these regulations, the Department of Health Professions at Lawson State Community College has developed an **Exposure Control Plan** and taken the following measures to reduce the risk of infection by bloodborne pathogens.

1. As an important safeguard, all students will be provided with a copy of the OSHA rules and regulations and are required to read the information for understanding. Students are also strongly encouraged to ask questions as it relates to any information covered in such policies.
2. All students will be made aware of the Exposure Control Plan for the Health Professions Program at Lawson State Community College and are required to read the information for understanding. Students are also strongly encouraged to ask questions as it relates to any information covered in such policies.
3. No invasive procedures will be performed in the lab except with mannequins.
4. Students will be oriented by the instructor to the policies and procedures of the agency to which they are assigned for clinical prior to their first patient care assignment. All students must familiarize themselves and follow those policies and procedures of the agency in which they are assigned for clinical that pertain to infection control and compliance with OSHA regulations related to bloodborne pathogens. Failure to follow these procedures will result in a clinical absence. The incident must be documented by the clinical instructor and signed by the student. An incident involving failure to follow procedure aimed at controlling the spread of bloodborne pathogens may result in dismissal from the program.
5. Students will be presented theory and demonstrations of the appropriate personal protective equipment to use, and the correct way to use the equipment. Students must perform a return demonstration that is satisfactory according to critical requirements prior to attending clinical. Clinical missed due to lack of satisfactory skill demonstration will be unexcused.
6. Students will be presented theory and demonstration in principles of medical asepsis and must perform a return demonstration that is satisfactory according to critical requirement prior to attending clinical. Clinical missed due to lack of satisfactory skills demonstration will be unexcused.
7. Students will receive theory and demonstration of correct hand-washing techniques and must perform a return demonstration that is satisfactory according to critical requirement prior to attending clinical. Clinical missed due to lack of satisfactory skills demonstration will be unexcused.

8. The following personal hygiene and/or work practices in the clinic will be observed at all times. Failure to comply will result in a clinical absence. The incident must be documented by the clinical instructor and signed by the student. Failure to comply with these policies may result in dismissal from the program.
- a) Universal precautions as recommended or defined by the CDC and/or OSHA must be served in all circumstances in order to prevent contact with blood and other potentially infectious materials.
 - b) Specimens of blood or other potentially infectious materials should be handled according to the policies of the agency in which the student is assigned for clinical experience.
 - c) Any equipment that should become contaminated with blood or other infectious materials should be reported to the person in charge of the facility to which the student is assigned and agency's policies should be followed in handling the contaminated equipment.
 - d) Students should handle, decontaminate, and/or dispose of contaminated personal protective equipment according to the policies of the agency to which they are assigned.
 - e) Any uniform or other garments that become contaminated by blood or other potentially infectious materials should be removed immediately or as soon as feasible and handled according to the policies of the agency to which the students are assigned.
 - f) Gloves should be worn when it can be reasonably anticipated that the student may have hand contact with blood, other potentially infectious materials, mucous membranes, and/or non-intact skin; and when handling/touching contaminated items or surfaces. Gloves must be changed after contact with each patient. Any glove that becomes torn should be replaced immediately or as soon as is feasible. Disposal of the gloves following use should follow the policies of the agency to which the student is assigned.
 - g) Students should wash their hands immediately or as soon as possible after removal of gloves or other personal protective equipment and after hand contact with blood or other potentially infectious materials.
 - h) Students should wash hands and any other skin with soap and water, or flush mucous membranes with water, immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.
 - i) All personal protective equipment should be removed immediately upon ceasing to provide care to the patient, or as soon as possible if contaminated, and placed in an appropriately designated area or container for storage, washing decontamination or disposal according to the policies of the agency.
 - j) The handling and disposal of contaminated sharps should be carried out according to the policies of the agency to which the student is assigned for clinical.

- k) Students are prohibited from eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses (personal) in immediate patient care areas or other areas where there is a potential for blood or potentially infectious material exposure.
- l) All procedures involving blood or other potentially infectious materials should be performed in such a manner as to minimize splashing, spraying and aerosolization of these substances.
- m) Where there is potential for exposure to blood and/or other potentially infectious materials, students will be required to use appropriate personal protective equipment. This "appropriate" equipment will not permit blood or other potentially infectious materials to pass through to reach work/street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time the equipment is to be used. The equipment may include but is not limited to gloves, gowns, eye protection, masks or shields etc. The type and characteristics of the protective clothing will depend upon the task and degree of exposure anticipated. The policies of the agency to which the students are assigned for clinical/lab should be followed in regard to protective apparel to be worn in various situations.
- n) Masks in combination with eye protection devices, such as goggles or glasses with solid side shield, or chin length face shields should be worn whenever splashes, sprays, splatters, or droplets of blood or other potentially infectious materials may be generated and eye, nose or mouth contamination can be reasonably anticipated.
- o) Contaminated work surfaces should be decontaminated according to the policies of the agency to which the students are assigned.
- p) Broken glassware should not be picked up directly with hands but should be cleaned up using mechanical means such as a brush, dust pan, tongs or forceps.
- q) Regulated waste materials should be handled and disposed of according to the policies of the agency to which the student is assigned. All containers for regulated waste should be closable, puncture resistant, leak proof on side and bottom and labeled or color-coded.
- r) Contaminated laundry should be handled as little as possible with a minimum of agitation. Contaminated laundry should be bagged or containerized at the location where it was used and should not be sorted or rinsed in the location of use. Contaminated laundry should be placed and transported in bags or containers labeled or color-coded according to the policies of the agency. Whenever contaminated laundry is wet and present a reasonable likelihood of soak-through or leakage the laundry should be placed and transported in containers which prevent soak through to the exterior. Students who have been in contact with contaminated laundry should wear protective gloves or other appropriate personal protective equipment.
- s) Items which contain blood or other potentially infectious materials or are contaminated by blood or potentially infectious material are referred to as BIOHAZARDS. Students should recognize the Biohazard label as being fluorescent orange or orange-red with lettering or symbols in a contrasting color with the following legend:

They should recognize that red bags or red containers may be substituted for labels. Students should handle any material labeled as Biohazard according to the policies of the agency.

- t) Students should treat all blood and body fluids as if known to be infectious for bloodborne pathogens.
- u) All laboratory specimens of body substances are considered to be potentially infectious and should be handled according to the policies of the agency

POLICY ON INFECTIOUS DISEASES

Lawson State Community College is ethically obligated to protect the privacy and confidentiality of any faculty member, students or staff member who has tested positive for an infectious disease. Department of Health Professions personnel who pose a risk of transmitting an infectious disease **must** consult with appropriate health-care professionals to determine whether continuing to provide professional services represents a material risk to the patient and/or self. If a Department of Health Professions faculty, student or staff member learns that continuing to provide professional services represents a material risk to patients, that person should so inform the Program Chairperson/Director. If so informed, the program director will take steps consistent with the advice of appropriate health-care professionals and with current federal, state, and/or local guidelines and will review matters on a case-by-case basis to decide what actions, if any, need to be taken to protect against direct threat of harm to others.

Qualified individuals will not be denied admission to the Department of Health Professions Programs or employment as a faculty or staff member solely on the basis of HIV status. A Department of Health Professions program student, faculty or staff member in direct patient contact, who believes he/she to be at risk has an ethical responsibility to know his/her HIV antibody status. The testing decision will be voluntary, but due to the nature of the disease, the student, faculty, or staff member in direct patient contact is encouraged to be tested.

All Department of Health Profession students and faculty are professionally and ethically obligated to provide patient care with compassion and respect for human dignity. No Department of Health Profession student or faculty may refuse to treat a patient solely because the patient is high risk for contracting, or is HIV positive, or has hepatitis, or any other infectious disease.

DISCIPLINARY ACTION

(Clinical Settings)

Patient safety must be the primary concern of the instructor when overseeing clinical experiences. Therefore, it will be the moral and ethical responsibility of the instructor to recommend any student EMT for disciplinary actions when a member of the hospital or Fire and Rescue professional staff or the instructor observes the commission or omission of a practice which endangers the patient. The definition of “practice which endangers the patient” shall be left to the professional judgment of the nurse or professional hospital staff member. The “unsafe practice” will be documented and signed by the observer and forwarded within 48-hours to the Chairperson/Program Director of the Health Professions Program you are enrolled in, the Associate Dean of the Health Professions Programs and Academic Dean of the College.

Upon notification by a professional staff member a critical incident report is being executed, the supervising faculty member will immediately remove a student from further clinical experiences. Recommendations will be made to the Chairperson/Program Director of the Health Professions Program in which you are enrolled and may include dismissal from the Health Professions program. Until such time as appropriate action is completed, the student is prohibited from attending further clinical experiences. The student is provided an opportunity for a discussion of the problem. All decisions will be reached through collaborative discussions by the agency and the school.

Student Conduct

Students will be expected to demonstrate responsible, ethical and professional behavior at all times. Failure to comply with this will lead to disciplinary action according to the student code and grievance procedure.

Academic Dishonesty

All forms of academic dishonesty including, but not limited to, cheating on tests, plagiarism, collusion, and falsification of information will call for discipline.

- Cheating on tests is defined to include the following:
 - ✓ Copying from another student’s test paper.
 - ✓ Using materials during a test not authorized by the person administering the test.
 - ✓ Collaborating with any other person during a test without permission.
 - ✓ Knowingly obtaining, using, buying, selling, transportation, or soliciting in whole or in part, the contents of an un-administered test and
 - ✓ Bribing any other person to obtain tests or information about tests.

- “Plagiarism” is defined as the appropriation of any other person’s work and the unacknowledged incorporation of that work in one’s own work offered for credit.
- “Collusion” is defined as the unauthorized collaboration with any other person in preparing work offered for credit.
- Falsification of information, and other unlawful acts with intent to deceive is defined as:
 - ✓ Forgery, alteration, or misuse of college documents, records, or identification cards.
 - ✓ Alteration of answers on answer sheet after grading has taken place.

STUDENT DRUG AND ALCOHOL SCREEN POLICY

Any student who enrolls in a Lawson State Community College EMT program and desires to participate in courses which have a clinical component is required to have an initial pre-clinical drug and alcohol screening. The student must abide by the College’s Drug and Alcohol Screen Policy and Clinical agency policy for which the student is assigned clinical practice. This policy includes random drug and alcohol screening and reasonable suspicious screening.

I. Pre-Clinical Screening

1. All students will receive notice of the drug and alcohol screening guidelines prior to admission to the Health Professions programs.
2. The Health Professions programs will maintain on file a signed consent to drug and alcohol screening from each student. Students have the right to refuse to consent to drug and alcohol testing under this program, however, students who decline participation in the program will not be permitted to participate in courses with a clinical lab component.
3. Drug and alcohol screening will be scheduled and conducted by a certified drug screening agency. The fee for testing is to be paid by the student.
4. Any student failing to report for screening at the designated time and place must complete testing within 24 hours of that date and/or provide documentation of extenuating circumstances.
5. Failure to complete drug screening with a negative test results on the 10 Classes of Drugs and alcohol as required by the College and/or Clinical Agency will prohibit the student from completing the clinical component of required Health Professions courses.
6. Positive drug and alcohol screens will be confirmed by the Medical Review Officer. No sample is reported as positive before it has been tested as least three times.
7. Results will be sent to the Associate Dean of the Department of Health Professions at Lawson State Community College. The results will then be designated to the chairperson/director of the program in which you are enrolled.
8. A student who is unable to complete the clinical component of required courses due to a positive drug and/or screen may apply for readmission to the Health Professions program. The student will be considered for readmission according to the criteria in Section VI of this document.

II. Random Drug and Alcohol Screening

At any point or time in a student's enrollment, they may be subject to a random drug and/or alcohol screen. The Chairperson of the program you are enrolled in will establish the number of the random screening sample. The selection will be made from all currently enrolled Health Professions students using a statistically random procedure. After being notified of their selection, students will report to the certified drug screening agency at the designated time and place. The same procedural steps (2-13) outlined in Section IV Student Drug Screen Procedure will be used except that there is no cost to the student for a random screen (step # 1 Section IV).

III. Reasonable Suspicion Screening

Students may also be required to submit to reasonable suspicion testing as stipulated in the drug and alcohol screen policy of the College and/or Clinical Agency while participating in clinical experiences. Reasonable suspicion is defined as but not limited to the following behaviors:

1. Observable phenomena, such as direct observation of drug/alcohol use and/or the physical symptoms or manifestations of being under the influence of a drug/alcohol;
2. Abnormal conduct or erratic behavior while on the clinical unit, absenteeism, tardiness or deterioration in performance;
3. Evidence of tampering with a drug/alcohol test;
4. Information that the individual has caused or contributed to an incident in the clinical agency;
5. Evidence of involvement in the use, possession, sale, solicitation or transfer of drugs/alcohol while enrolled in the Health Professions programs.

At any point or time in a student's enrollment, the student may be subject to a reasonable suspicion drug/alcohol screen. After a student's behavior is noted as suspicious, the student will report to the certified drug screening agency at the designated time and place. The same procedural steps (1-11) outlined in Section IV Student Drug Screen Procedure will be used.

IV. Student Drug And Alcohol Screen Procedure

1. Students must pay the required screening fee prior to time of specimen collection.
2. Students must submit a photo ID and social security number at the time of specimen collection
3. The collector will be a licensed medical professional or technician who has been trained for collection in accordance with Chain of Custody and Control procedures. The collector will explain the collection procedure and Chain of Custody form to the student and provide a sealed collection container.
4. Students must remove unnecessary outer garments (coats, sweaters, bags, etc.) and remove items from pockets when entering the collection site.

5. The collector will ask the student if he or she is currently taking any medications. It is important that the student bring all prescription medication at the time of testing.
6. The collector will collect a monitored urine specimen.
7. In the presence of the student, the collector will seal the urine specimen with a tamper proof security seal and affix an identification label, initial the security seal and affix an identification label with code number.
8. The student will verify the information on the identification label, initial the security seal, read and sign the Chain of Custody Form.
9. The collector will sign the Chain of Custody Form and give the student the appropriate copy.
10. The collector will forward the sealed urine specimen and Chain of Custody Form to the designated certified testing center/laboratory for testing.
11. Specimens will be screened for ten (10) classes of drugs and alcohol:
 1. Amphetamines
 2. Barbiturates
 3. Benzodiazepines
 4. Cocaine
 5. Cannabinoids MJ
 6. Metaqualone
 7. Opiates
 8. Phencyclidine PCP
 9. Propoxyphene Morphine
 10. Methadone
 11. Alcohol
12. Positive screens will be confirmed by the Medical Review Officer.
13. The Chairperson/Director will inform students of the screening results within seven (7) working days of testing.

V. Confidentiality

The Associate Dean of the Department of Health Professions will receive all test results. Confidentiality of the test results will be maintained. Only the Associate Dean and the chairperson/director of the program in which you are enrolled and the student will have access to the results, the exception being if any legal actions occurs which require access to test results.

VI. To be considered for readmission, students who withdraw from the Health Professions program due to a positive drug and/or alcohol screen must:

1. Submit a letter from a treatment agency verifying completion of a substance abuse treatment program.
2. Submit to an unannounced drug screen at the student's expense prior to readmission. A positive screen will result in ineligibility for readmission.

VII. Drug and alcohol screening policies/programs suggested or required by the Alabama Board of Health Professions, Lawson State Community College, and/or various institutions

with which the College contracts may vary from time to time in any or all of their aspects. Students will be required to comply with the screening which satisfies the program or requirement established by the Alabama Department of Public Health or any clinical agency with whom the College contracts for clinical experience, whether it be pre-clinical drug and/or alcohol screening, random drug and/or alcohol screen, or reasonable suspicious screening.

Some of the ten classes of drugs for which screening will be conducted are available by prescription from health care practitioners. Prescription drugs prescribed to a student by an appropriate health care practitioner may nevertheless be subject to abuse and may give rise to reasonable suspicion testing. The fact that a student has a prescription for one or more of the ten classes of drugs which are legally prescribed by a health care practitioner does not necessarily, in and of itself, excuse the student from the effect of this policy. The Medical Review officer will follow up and give recommendation (s).

***Fees are subject to change without prior notification.**

Lawson State Community College

Health Professions Programs Student Drug, Alcohol and Background Screen Policy Participation Form

I understand that any student who enrolls in the Lawson State Community College Health Professions programs and desires to participate in courses which have a clinical component is required to have an initial pre-clinical drug, alcohol and background screening. I certify that I have received a copy of the Lawson State Community College Drug, Alcohol and Background Screen Policy, have read, and understand the requirement of the policy and guidelines. I further understand that if I fail to provide a certified negative drug, alcohol and/or background screen result that I may be unable to participate in the clinical portion of the Health Professions program. Clinical and classroom participation are required to successfully complete the program.

BY SIGNING THIS DOCUMENT, I AM INDICATING THAT I HAVE READ, UNDERSTAND, AND VOLUNTARILY AGREE TO THE REQUIREMENT TO HAVE A DRUG, ALCOHOL AND BACKGROUND SCREEN AND TO PROVIDE A CERTIFIED NEGATIVE DRUG, ALCOHOL AND BACKGROUND SCREEN RESULT PRIOR TO PARTICIPATION IN THE CLINICAL COMPONENT OF THE HEALTH PROFESSIONS PROGRAM.

A COPY OF THIS SIGNED AND DATED DOCUMENT WILL CONSTITUTE MY CONSENT FOR THE CERTIFIED LABORATORY PERFORMING THE DRUG ALCOHOL AND BACKGROUND SCREEN TO RELEASE THE ORIGINAL RESULTS OF ANY DRUG, ALCOHOL AND/OR BACKGROUND SCREEN TO THE LAWSON STATE COMMUNITY COLLEGE HEALTH PROFESSIONS PROGRAMS. UPON REQUEST LAWSON STATE COMMUNITY COLLEGE DEPARTMENT OF HEALTH PROFESSIONS MAY RELEASE THE RESULTS TO THE CLINICAL AGENCY PRIOR TO MY PARTICIPATION IN THE CLINICAL COMPONENT OF THE HEALTH PROFESSIONS PROGRAM.

I further understand that my continued participation in the Lawson State Community College Health Professions Programs is conditional upon satisfaction of the requirements of the clinical agencies providing clinical rotations for the Health Professions programs.

Student Signature

Student Printed Name

Date

Last Review:

June 2019

**Lawson State Community College
Department of Health Professions**

Confidentiality, Privacy and Information Security

Health Insurance Portability and Accountability Act (HIPAA) regulations affect access, storage, transfer, and discussion of patient information. Information contained in a client's record is confidential. As a student, you are granted access to client's records for educational purposes. You have a duty to keep the information private and confidential. As a student, in most cases, you will be required to use only the client's initials on school assignments.

What is HIPAA Security?

The goals of these rules are to:

1. Ensure the Confidentiality, Integrity, and Availability of all ePHI an organization creates, receives, maintains, or transmits.
2. Protect against threats or hazards to the security or integrity of such information.
3. Protect against uses or disclosures of such information that are not permitted or required by the Privacy Rule.
4. Ensure compliance by its workforce.

Protected Health Information (PHI)

Identifiable Patient Information

- Name
- Address
- Dates of birth, admission, discharge, death
- Email address
- Medical record number
- Health plan beneficiary number
- Social Security number
- Account number
- Certificate/License number
- Any vehicle or other device serial NUMBER
- WEB URI
- Internet Protocol (IP) address
- Finger or voice prints
- Photographic images
- Medical history & treatment
- Financial information (insurance, credit/debit card numbers)

Information About Employees

- Driver's license number
- Social Security number
- Bank account numbers
- User ID and passwords

Agencies Information

- Financial and operational information
- Vendors and research sponsors
- System access passwords

There are two things to remember about protecting confidential information:

1. Access information only if you need it to do your job/classroom assignments.
2. Share information only with others who need it to do their jobs (your clinical supervisor and students during clinical/classroom experiences)

Storage and Sharing of Confidential

1. Verbal Communication (talking)
 - Share only with someone who needs to know the information to perform their job.
 - Speak where others (including patient family members and friends) cannot hear, if possible
 - Give only the minimum amount of information necessary.
 - **Be aware of your surroundings** - Avoid discussing PHI in public areas such as cafeterias or elevators, ect. When conversations in open areas cannot be avoided, remember to keep your voice low
2. Paper Documents
 - Your facility's Health Information Management (HIM) is primarily responsible for releasing (or making available) PHI, but sometimes personnel in other departments may release PHI.
 - If your department releases PHI outside of HIM for reasons other than treatment, payment or health care operations, you may need to track those disclosures.
 - Researchers that request PHI for research must submit appropriate documentations.
3. Electronic Data
 - Review information before sending to make sure you are only sending what is necessary.
 - Double check the email address or fax number. Faxing information to the wrong number may lead to disciplinary action.
 - Fax only when mail delivery is not fast enough to met the patient's needs
 - Always use a fax cover sheet with Confidentiality Notice
 - Email scanned documents to yourself before emailing them to the final recipient
 - Do not share your username/password with anyone.

Tips to determine if you can use or share PHI:

Is the disclosure for treatment, payment or health operations purposes?

1. If not, do you have written permission from the patient to share?
2. If not, is there another legal requirement for disclosure.

If you answer "No" to all three, do not access, use or share the PHI

Disposal of Confidential Information:

Cross-cut shred or place in secure disposal bins:

- Paper
- Microfiche
- CD-ROMs
- Diskettes

Never place confidential information in the trash!!! When you have leased equipment such as copiers, be sure all confidential information has been removed before returning it.

Releasing PHI: Subpoenas:

A subpoena is a document issued by a court that requires a person to appear in court or to give some kind of evidence. If you receive a subpoena, it is critical to alert and direct the person to the right department or to the Legal department or your Compliance Office. A subpoena does not remove HIPAA privacy protections.

Protecting Electronic Data:

- Avoid internet threats (avoid phishing)
- Ensure data is encrypted
- Use social media and blogging sites appropriately
- Create strong passwords
- Secure computers and other mobile devices
- Do not use your personal email to conduct business
- Confidential data should not be emailed outside your health care network. If you need to use email for transmitting confidential information, be sure to:
 - Obtain approval from your manager/faculty member who has obtained approval.
 - Protect the contents with encryption (make the data unreadable to those who do not have a key to “unlock” the encryption).

Sanctions for HIPAA Violations

In an investigation into HIPAA violations, the College, Agency and you may be subject to civil or even criminal penalties. These penalties may include fines and possible time in jails. Additionally, you will also be subject to disciplinary actions within the College (up to dismissal from the program).

My signature below indicates that I have been provided information related to HIPAA Training and I am aware of the consequences of violation of any rules relating to breach of confidentiality or privacy while exposed to information during the clinical experiences.

Student's Printed Name

Student's Signature

Date

CHILDREN ON CAMPUS

In order to retain the proper decorum for the delivery of college-level instruction in the classroom, students enrolled in Lawson State Community College are not permitted (except under the circumstances stated herein as an exception to the general policy) to bring children into College classrooms, labs, or shops, regardless of the age of the child. Nor should students leave unattended children in any building or on any grounds of the College at any time. An exception to this policy can be made with the approval of the respective instructor if the child of a Lawson State Community College student is a high school senior, or at least 18 years of age, and is a prospective student at Lawson State Community College. In such case, the student may be allowed to bring the child to no more than one session of each course that the student is taking.

In addition, in the interest of the safety, unless a person under the age of 18 (who is not a student of Lawson State Community College or another participating college) is a participant in a Lawson State Community College sponsored activity, an adult must supervise or accompany the young person at times that the young person is on any campus of Lawson State Community College. Furthermore, it is not permissible for any person to leave a child in custodial care on any premises of Lawson State Community College while attending classes or extracurricular activities. It is recommended that Lawson State Community College students and visitors leave their children in the care of an appropriate childcare provider while attending any class, function, or other College activity that may prevent their personal supervision of their children.

This policy applies to all students, guests, and visitors of Lawson State Community College and shall be published in all student handbooks and posted in appropriate locations throughout the campuses of Lawson State Community College. Lawson State Community College will not be liable for any injury, or property loss or damage, suffered by any party as a result of a violation of this policy.

-Approved December 3, 2002 by President's Cabinet

EVALUATION POLICIES

- Theory grades are based upon achievement of unit examinations. Examinations may include questions and statement from the lectures, assigned group projects, audio-visual materials and assigned readings.
- Clinical grades are based upon mastery of skills as related to the course content and demonstrated in the clinical setting and the skill laboratory.

Each student is given both verbal and written notification of theory and clinical grades and is counseled if problems exist or improvement is needed.

A student not scoring 70 or greater on any unit exam will be required to spend a minimum of two (2) hours in either Learning Resources Center (Lawson State Community College Library) reviewing relevant filmstrips, videos, etc.

Letter grades are assigned in theory and satisfactory/unsatisfactory grades are assigned in the clinical component.

The student must attain a theory grade of "C" or better and a "satisfactory" in the clinical setting to successfully complete a course. The student cannot pass the course based on grade point average alone, if his/her performance is not satisfactory in the clinical area.

Grades are indicated by letters which have values on a scale of 100 as follows: ***No rounding of test scores is done (ex. 78.6 is 78.6). Only the final course grade is rounded: 0.5 or higher is raised to the next whole number.***

100 – 90 = A

89 - 80 = B

79 - 70 = C

69 - 60 = D

59 & Below = F

RESOLUTION OF AN IMMEDIATE PROBLEM

Any student who feels he/she has been treated “unfairly” by an instructor has the right to have complaint(s) aired and/or investigated. This document describes the procedure whereby the student may present his/her complaints.

Step 1. The student should consult with the instructor and program director promptly (within 3 days) after the occurrence of the event. If the appeal is not satisfied at this level; the student should meet with the Department Chairperson then the Associate Dean of Health Professions in an informal attempt to reach closure. The conference will be recorded on the appropriate form with the rationale for the decision. One form will be given to the student, one copy for the student record, and one copy for the Nursing Program’s file.

Step 2. If an agreement is not reached using the informal approach, the student may file a formal written appeal by following the procedure in the College Student Handbook and on-line process regarding complaints.

STUDENT HANDBOOK COMPLAINTS GRIEVANCES, GRADE APPEALS AND CODE OF CONDUCT

[HTTP://WWW.LAWSONSTATE.EDU/SITES/WWW/UPLOADS/ACADEMIC%20AFFAIRS/STUDENT%20HANDBOOK%202017.PDF](http://www.lawsonstate.edu/sites/www/uploads/academic%20affairs/student%20handbook%202017.pdf)

LAWSON STATE COMMUNITY COLLEGE

Department of Health Professions

INFORMAL GRIEVANCE REPORT - FORM A

PART I. GRIEVANCE

TO: Chairperson/Director

FROM: _____

DEPARTMENT/PROGRAM: _____

HOME ADDRESS: _____

HOME PHONE NUMBER: _____

Date(s) of occurrence(s) upon which grievance is based: _____

Description of Grievance: (If complainant is alleging a violation based on gender, handicap, or disability, complaint should include a reference to the pertinent section(s), if known, of the relevant statute or regulation.) (Use additional pages if necessary to describe grievance. Please attach any supporting documents.)

Complainant's Signature: _____

(Submit original and two copies to the Chairperson/Director)

LAWSON STATE COMMUNITY COLLEGE
Emergency Medical Technician and Advanced Emergency
Medical Technician
Student Handbook

Acknowledgment of Department of Health Professions Student Handbook

I have received and have access to an online copy of the Department of Health Professions Student Handbook.

In receiving the Student Handbook, I understand that I am expected to adhere to the EMT Guidelines and Policies and that the EMT Guidelines and Policies will **not** be changed to meet my own desires. I understand that these policies are official addendums to the Lawson State Community College Student Handbook and that I am expected to abide by the contents of each.

Student Name (PRINTED)

Student Signature

Date