## **Northwest Community Paramedic Program Academic Calendar F24-25**

- Presumes face to face instruction and full access to clinical experiences. Expect changes if conditions require virtual classes and restriction of clinical units.
- Assumed knowledge: EMT content; baseline reading and math competency; and Medical Terminology Harper College Reminder: Fall 2024 [Designated Payment Due Date] August 2, 2024 (5:00pm)

		W	eek # 1			
Date	Time		Topic		Faculty	
9/9/24 Mon	0900-1200	Welcome! Orientation; squads, jobs, and performance expectations; detailed review of student syllabus, academic calendar, Student Handbook; lcebreaker activity  Sign & submit agreements: Learning Contract; Release of academic Information; consents for invasive procedures; photographs; and emergency preparedness exercise participation		ents for invasive procedures;	M. Gentile	
	1200-1300		Lunch			
	1300-1700	Orientation cont.				
9/10/24 Tue	0900-1100	Workforce safety, wellness, and resilic standard safety precautions; infectious d control; disease transmission; blood borr protective equipment (PPE); lifting and m resource management; injury prevention Public health mission & goals; EMS role geographic, economic demographic dete and community education; and health provaccinations/immunizations; impacts of peconomic issues; bioinformatics.	seases, prevention & be pathogens, & personal poving patients; crew and wellness; es in public health, social, rminants of health; patient protion; screenings &	Policies:  I-2 Infection Control – DICOs  I-4: Impaired practice  Skills & Application:  Selection, donning, doffing, disposal of PPE; contact, droplet, & airborne precautions; exposure follow-up	M. Gentile	
	1100-1200	resilience and suicide prevention; body's	Responder mental and emotional health wellness principles; resilience and suicide prevention; body's response to stress, stress mitigation and management; RISE team access			
	1200-1300		Lunch			
	1300-1700			p-1: Hospital Resource c; C2 CE; C3 Crisis response plan c; M-9:Med Engines/ Alternate elicensure; S-2: Specialized EMS cg Requirements; T-2: Patient ection of Receiving Facility cedure Manual, Drug and estem website: der Standards of Practice tab eles: epics-services/emergency- /ems.html	K. Chesney	
9/11/24	0900-1200	Intro to medical math			M. Gentile	
Wed	1200-1300		Lunch			
	1300-1500	Clinical Judgement: Elements of effecti thinking process; leadership and commu		ey components for the critical	M. Gentile	

		W	eek # 1		
Date	Time		Topic		Faculty
	1500-1700	Patient assessment: Primary assessment Tools of assessment Maneuvers of assessment Sequencing, timing, and technique; risk mitigation, control and correct hazards, request adequate resources; crime scene responses; detect and resuscitate clinically evident, immediate life-threats	SOPs: General pt assessment; Initial Medical Care Pediatric IMC, Elderly Patients Policies: P-2: Independent Physician/Nurse On Scene; P-3: Interaction w/ Police/ Crime Scene Responses Procedure manual: General Pt Assessment	Skills & Application: - Scene size up/situational awareness, dynamic risk assessment & mitigation - Scene mgt - Impact of the environment on patient care - Hazard abatement - Violence; crime scenes - Need for specialized resources - Finding & resuscitating clinically evident immediate life-threats	M. Gentile
9/12/24 Thurs	0900-1200	Patient assessment: Secondary assess; including age-related variations in pediatric and geriatric patients	assess); pertinent negatives therapeutic communication techniques. Obtaining, repovital signs; Review of Systemsounds); and monitoring and Identification of monitoring - Pulse oximetry (SpO <sub>2</sub> )/Emonitoring - Non-invasive blood press - Cardiac monitoring rhyth acquisition, interpretation	Obtaining a chief complaint, assoc. S&S, SAMPLE Hx (pain assess); pertinent negatives; interviewing techniques; therapeutic communication and adaptive interview techniques. Obtaining, reporting and documenting accurate vital signs; Review of Systems:(breath, heart, and bowel sounds); and monitoring and reassessment <a href="Monitoring devices">Monitoring devices</a> : - Pulse oximetry (SpO <sub>2</sub> )/End tidal CO <sub>2</sub> (EtCO <sub>2</sub> ) monitoring - Non-invasive blood pressure - Cardiac monitoring rhythm strip and 12 L ECG acquisition, interpretation, and transmission - Blood glucose determination	
	1200-1300		Lunch	, , , , , , , , , , , , , , , , , , ,	
	1300-1500	Patient assessment cont.			Bill
	1500-1700	EMS communications: Equipment and communication systems; communication with other health care professionals to include cohesive and organized patient handoff; team communication & dynamics; telemetric monitoring devices and transmission of clinical data, including video data	Policies: C-8 Communications Policy O-1 Override SOP: OLMC Report/Handoff Reports	Skills & Application: Role playing calling OLMC for a BLS patient	M. Gentile
9/13/24	0900-1000	Quiz 1 blueprint review; checks for under	standing		M Gentile
Fri	1000-1200	Pharmacology: Culture of safety; Federal and state legislation, regulation, and standards; DEA; drug profiles, names; classifications; schedules; pharmacokinetics; pharmacodynamics, storage & security; metabolism & excretion; weight-based dosing, interactions; side effects; toxicity; tolerance, tachyphylaxis, risks of polypharmacy	Policies: C-6: Controlled Substances; Logs; D-2: Drug Replacement; D-3: Exchanging drugs; R-7 Reportable Incidents; SOP: Drug appendix	Skills & Application: Controlled Substance Logs Peer to Peer Exchange form Acute medications Chronic or maintenance medications	Bill
	1200-1300		Lunch		
	1300-1400	Pharmacology cont.			Bill
	1400-1700	Autonomic Nervous System: S neurotransmitters/receptors for e when stimulated or suppressed;	ach; clinical presentation	ns and physiologic impact	M. Gentile

			Week # 2			
Date	Time		То	pic		Faculty
9/16/24	0900-1030	Quiz 1				M. Gentile
Mon	1030-1200 Hospital clinical orientation			TBD-LC		
	1200-1300			Lunch		
	1300-1430	Hospital clinical signup				TBD-LC
	1430-1700	Medication administration: "7 Rights of drug administration"		uto-injector; IN (NA	utes of med administration AS); IV/IO; SL; NG; PO; Rectal;	M. Gentile
9/17/24	0900-1200	Respiratory A&P including	g age-related va	ariations in ped	diatric and geriatric pts	M. Gentile
Tue				Lunch		
	1300-1500	Respiratory A&P cont.				M. Gentile
	1500-1700	Oximetry: pulse oximetry application, interpretation				M. Gentile
9/18/24 Wed	0900-1100	Airway Management Airway assessment; techniques of assuring a patent airway: Positioning, BLS adjuncts; suctioning; FBAO maneuvers	SOP: Adult & peds FBAO		Skills & Application Peds & adults age-related variations:  Manual maneuvers; NPA/OPA; suction oral/tracheal; FBAO (BLS & ALS)	M. Gentile
	1100-1200	Endotracheal intubation (ETI) direct laryngoscopy	SOP: Adv. airway		Skills & Application DL (unmedicated) ETI; use of bougie	Dr. Jordan
	1200-1300	Lunch				
	1300-1700	ETI cont./ Drug assisted intubation (DAI)	SOP: Adv. Airw	ays/DAI	Skills & Application  Drugs: ketamine, etomidate, midazolam, fentanyl	Dr. Jordan
9/19/24 Thurs	0900-1200	Vascular access: periphe Nexiva IV catheter demo (			cation: IV access adults & peds; ampling; IVPB/Sapphire pump	M. Gentile
	1200-1300			Lunch		
	1300-1500	Intraosseous infusions		Skills & Application: IO access (approved sites adults and peds)		M. Gentile
	1500-1700	Platinum Orientation. Mu	<mark>ist have estab</mark> l	<mark>lished a Plati</mark> ı	num account	TBD-LC
9/20/24 Fri		Lab 1: Donnin  Stations  - IM x & SUBQ on manikin  - MDI; HHN, Intranasal	Goals for SMC M Comprehensive	atrix Criteria: Physical Assessr	e lab   Prereq: watch video	
	0900-1200	- Midi; HHN, Illidalasal     - Pt assessment (w/ VS)     - Pt assessment (w VS)     - COMPETENCY:     Donning/Doffing PPE	-	N) 1 Formative (Fo mative Individual S	, ,	Lab Team
	1200-1300			Lunch		
	1300-1700	Sapphire pump demo TBD with	T. Haves Schedu	Lab 2		
Ш	1	Cappinio panip denio TDD Will	T. Hayes Seriedal	<u>~</u>		

	Week # 2						
Date	Time		Торіс				
		Stations Live IM X 1 station IO access(1 w/ lidocaine) X 2 IV Access w/ infusion X 2	Goals for SMC Matrix Criteria:  IM injection: 1 Summative Skill on LIVE pt; (1 of 2)  IV Access: 1 Formative Individual Skill in lab; (1 of 2)  IO Access: 1 Formative Individual Skill in Lab; (1 of 4)  IV Bolus Med. Admin: 1 Formative Ind. Skill in lab; (1 of 2)  IV infusion Med. Admin: 1 Formative Ind. Skill in lab; (1 of 2)	Lab Team			

		Wee	k # 3 (1 clinical shift)			
Date	Time		Topic		Faculty	
		EMS 217 begins	(actual start 9-27-24; or 9-	28, 9-29)		
9/23/24	0900-1015	Quiz 2			M Gentile	
Mon	1015-1200	Video laryngoscopy (VL) (King Vision)	SOP: Advanced airways/DAI	Skills & Application VL ETI	Dr. Jordan	
	1200-1300		Lunch			
	1300-1700	Supraglottic airway (SGA)/Blind insertion airway device (BIAD: igel; LMA; CombiTube & Other routes of intubation	SOP: Advanced airways Peds Airway Adjuncts	Skills & Application In-line; inverse; digital ETI; SGA (i-gel)	M. Gentile	
9/24/24 Tue	0900-1030	Cricothyrotomy: Needle and surgical	*order sheep trachea's for hands on skills demo	Skills & Application: Needle & surgical cric	Mike & TBD- LC	
	1030-1200	Cricothyrotomy Lab: Sheep Trachea	Cricothyrotomy (Surgical): 1 Formative Ind. Skill in lab (1 of 2) Cricothyrotomy (Needle): 1 Formative Ind. Skill in lab; (2 of 2)		Mike & TBD-LC	
	1200-1300	Lunch				
			Lab 3			
	1300-1700	Stations  - IV Access w/ IVP med  - IO access  - DL: BLS airways, preox, oximetry, suction, bougie  - VL BLS airways, preox, oximetry, suction, bougie  - SGA (i-gel)	Goals for SMC Matrix Criteria: - must calculate dose for ea. med IV Access: 1 Formative Individual Skill in scenario; (2 of 2) IV Med. Admin: 1 Formative Ind. Skill in lab; (2 of 2) IO Access: 1 Formative Ind. Skill in lab; (3 of 4) ETI: 2 Formative Individual Skill in lab; (1 & 2 of 2) ET suctioning: 2 Formative Ind. Skill in lab; (1 & 2 of 2) SGA adult: 2 Formative Individual Skill in lab; (1 & 2 of 2)		Lab Team	
9/25/24 Wed	0900-1200	O <sub>2</sub> delivery: NC, NRM, CPAP; BVM & PPV including age-related variations in pediatric and geriatric patients	Skills & Application: Adults & Peds: All O <sub>2</sub> delivery devices; BVM ventilations (1 & 2 person); Mouth to barrier, mask, mouth, nose, stoma – See Procedure Manual		M. Gentile	
	1200-1300		Lunch			
	1300-1700	Practice with BLS airway and O <sub>2</sub> delivery devices; 1 & 2 person BVM & PPV peer to peer  PPV with BVM: 2 Formative Individual Skill in lab (1 & 2 of 2)  Use of NC, NRM, CPAP masks  Live IM injection: 1 Summative Skill on LIVE pt; (2 of 2) Bill and Mike				
9/26/24 Thurs	0900-1200	ventilation/O2 delivery ap	ntegies; sedation and monito plication: BravoZone; dialog ario's/role play/mind maps.		M. Gentile	
	1200-1300		Lunch		•	
	1300-1700	Lab 4				

	Week # 3 (1 clinical shift)					
Date	Time		Торіс			
		Stations  - Live IVs X 2 stations (3 students attempt at each station – all observe)  - ALS FBAO, DL (suctioning/ Magill forceps/PPV)  - VL DAI (suctioning/PPV)  - SGA (i-gel) (PPV)	Goals for SMC Matrix Criteria:  IV Access: 1 Formative Individual Skill Live Patient (Pt)  IV Infusion Med Admin: 1 Formative Ind. Skill Live Pt  FBAO Removal w/ Magill Forceps: 1 Form. Ind. Skill in lab (1 of 2)  Endotracheal Int.: 1 Summative Ind. Skill in scenario; (1 & 2 of 10) *  Supraglottic (i-gel): 1 Summative Ind. Skill in scenario; (1 of 10)*  ET Suctioning: Summative Ind. Skill in scenario; (1 & 2 of 2)*  PPV w/ BVM: 3 Summative Ind. Skill in scenario; (1-3 of 10)*	Lab Team		
Fri 9/27; S	Fri 9/27; Sat 9/28; or Sun 9/29 Hospital Clinical (#1): ED (Adult)					

		Week	# 4 (1 clinical shift)			
Date	Time	Topic				
9/30/24	0900-1015	Quiz 3			M. Gentile	
Mon	1030-1200	Paramedic Roles & Responsibili reflect; emotional intelligence within they are assessed and evaluated. making; research principles to intel	n the affective domain of learning Research in EMS; data collectior	Levels of competence and how cy evidence-based decision	K. Chesney	
	1200-1300		Lunch			
	1300-1700	Therapeutic Communication: Health care literacy; interviewing techniques; verbal defusing strategies; managing communication challenges; family centered care; adjusting communication strategies for age, stage of development, patients with special needs; non-discriminatory communication that addresses inherent or unconscious bias, is culturally aware and sensitive, and intended to improve patient outcomes.		M. Gentile		
	Tue	e. 10/1; Sat. 10/5; or Sun 10/6	Hospital Clinical (#2):	Options: ED (Adult)		
10/2/24 Wed	0900-1200	Ethics in EMS: Ethical principles & decision making; ethical codes of conduct	Policy: E-5: Code of Ethics	Skills & Application: Values card exercise Ethical scenarios	M. Gentile	
	1200-1300	Lunch				
	1300-1700	Acid – Base Imbalances and interventions; using EtCO <sub>2</sub> to detect metabolic acidosis				
10/3/24	0900-1200	Fluid & Electrolytes			TBD	
Thurs	1200-1300		Lunch			
			Lab 5			
	1300-1700	Stations Ind. skill in scenario:  - FBOA retrieval, DL ETI, PPV BVM; ETI suction; X 1  - CPAP, i-gel, PPV BVM X 1  - Cric surgical X1  - Cric needle X 1  - IV Infusion w/ IV med X 1	Goals for SMC Matrix Criteria:  ET Intubation: 1 Summative Ind. Skill in scenario; (2 of 10) *  SGA (i-gel): 1 Summative Ind. Skill in scenario; (2 of 10) *  ET Suctioning: 1 Summative Ind. Skill in scenario; (2 of 2) *  PPV with BVM: 2 Summative Ind. Skill in lab; (3 & 4 of 10) *  CPAP: 1 Formative Individual Skill in scenario; (1 of 4)  Cric. (Needle): 1 Summative Ind. Skill in lab; (1 of 2) *  Cric. (Surgical): 1 Summative Ind. Skill in lab (2 of 2) *  FBAO removal w/ Magill Forceps: 1 form. ind. skill in lab (2 of 2) IVP Med: 1 Summative Ind. Skill in scenario; (1 of 2)		Lab Team	

	Week # 4 (1 clinical shift)						
Date	Time		Topic				
10/4/24 Fri	0900-1200	Legal: Legal system, civil and criminal law/burden of proof; negligence; torts, issues of consent/dissent; confidentiality (HIPAA); statutory duties; mandatory reporting; health care regulation; pt rights/advocacy	Policies: A-1 Abandonment D-1 Due Process G-1,-2,-3: Grievance policies M-8 Med Device Malfunction R-6 Refusal of Care R-7 Reportable Incidents	Skills & Application: Role play legal scenarios	Bill		
	1200-1300	Lunch					
			Lab 6				
	1300-1700	Stations Ind. skill in scenario:  Pt. assessment w/Vs  Pt. assessment w/Vs  Goals for SMC Matrix Criteria:  Patient Assessment: 1 Comprehensive Physical Assessment w/  Vital Signs; (1) (3 students perform at ea station)		Lab team			

		Week # 5	(1 clinical shift this week)			
Date	Time		Topic		Faculty	
10/7/24	0900-1100	Quiz 4	Quiz 4			
Mon	1100-1200	Quiz review; EMS 210 writte	en blueprint and practical e	xam expectations	M Gentile	
	1200-1300		Lunch			
			Lab 7			
	1300-1700	Stations: final prep for practical exam Part B:  - VL DAI CPAP; suction, oximetry; RASS, monitoring - Supraglottic Airway (i-gel); PPV - Cricothyrotomy Needle - Cricothyrotomy Surgical - FBAO; Magill forceps	Goals for SMC Matrix Criteria VL DAI ETI: Ind. Skill in scena Suctioning   IV med administra Supraglottic Airway: Ind. Skil CPAP: Individual Skill in scenar Cricothyrotomy (Needle): Ind Cricothyrotomy (Surgical): Ir FBAO Removal w/ Magill Force	rio tion   PPV II in scenario rio I. Skill in scenario nd. Skill in scenario	Lab Team	
10/8/24 Tues	0900-1200	Documentation Principles of medical documentation and report writing; recording patient findings; supporting medical necessity	Policies: C-7 Confidentiality D-4:Data Collection & submission   ePCR software   EMS Short Form SOP: Medical abbreviations	Skills & Application: Writing patient care reports (PCRs) that meet FACT criteria	Mike	
	1200-1300	Lunch				
		EMS 21	0 Practical Exams։ Com	petency measured		
	1300-1700 Stations Part A: - IO tibia access - Med admin: IVP/IVPB - Med admin IN/HHN		<ul><li>IV access</li><li>Med admin: IM/SUBG</li><li>General patient asses</li></ul>		Lab Team	
10/9/24 Wed	0900-1300	<ul><li>Supraglottic Airway (i-ge</li><li>Cricothyrotomy Needle</li></ul>	Stations Part B:  - VL DAI; CPAP; suction, oximetry; RASS; ongoing monitoring - Supraglottic Airway (i-gel); preox; PPV			
10/10/24	0900-1200	EMS	210 Cognitive EXAM (Auditori	um)	M. Gentile	
Thurs	1200-1300	Lunch				

Week # 5 (1 clinical shift this week)						
Date	Time	Topic	Faculty			
	1300-1400	Exam review ; brief for EMS 211 (LC 3 & 4)				
		EMS 210 ends				
Fri 10/11;	Fri 10/11; Sat 10/12; or Sun 10/13 Hospital Clinical (#3): Options: ED (Adult)   or the OR (not on Sat or Sun)					

			WEEK #6			
Date	Time		Topic		Faculty	
		EM	S 211 begins			
10/14/24 Mon	0900-1200	Respiratory disorders: Acute Adult and peds Hyperventilation syndrome; pulm. Embolism; spontaneous pneumothorax; non-cardiogenic pulmonary edema; disordered breathing caused by extreme obesity; dysfunction of the spinal cord, nerves, or resp. muscles; neoplasms of the lung; Pneumonia; resp. infections	SOP: Acute respiratory disorders (pneumonia/ influenza; Pulmonary embolism) Peds: Croup, epiglottitis, RSV/ Bronchiolitis   BRUE	Skills & Application: Drugs: albuterol, ipratropium, epinephrine 1 mg / 1mL, magnesium MDI, nebulizer: mouth piece/ mask/in-line w/ BVM & C-PAP	M. Gentile	
	1200-1300		Lunch			
	1300-1700	Respiratory disorders: Chronic: COPD/asthma; bronchopulmonary dysplasia	SOP: COPD/Asthma (adult and peds)		K. Chesney	
10/15/24	TBA	Active assailant	exercise - off site - instructi	ions will be given closer to dat	e	
10/16/24	0900-1200	Cardiovascular A&P				
Wed	1200-1300		Lunch			
	1300-1700	Cardiac A&P cont.			Bill	
10/17/24	0900-1200	SHOCK: General etiologies, pa	thophysiology – all forms	Shock SOPs	Mike	
Thurs	1200-1300		Lunch			
	1300-1700	Shock cont.				
10/18/24	0900-1200	Week 6 Theory into practice: B	ravoZone; Case Study/Scenario	s; Student Centered Activities	M. Gentile	
Fri	1200-1300	Lunch				
			Lab 8			
	1300-1700	Respiratory assess X 2 Shock assess VL DAI w/CPAP preox, oximetry, ET suctioning, PPV, IVP meds; RAAS SGA (i-gel) PPV, preox; suctioning  SGA (i-gel) PPV, preox; suctioning  SGA (i-gel): 1 Summative Ind. Skill in scenario; (4 of 10) *  ET Suctioning: 1 Extra Skill SGA (i-gel): 1 Summative Ind. Skill in scenario; (4 of 10) *		Lab team		

	WEEK #7: (2 Clinical shifts this week)							
Date	Time		Торіс					
10/21/24	0900-1030	Quiz 5			M. Gentile			
Mon	1030-1200	Acute Coronary Syndromes (ACS); cardiac assessment	SOP: ACS	Skills & Application: Drugs: ASA, NTG, fentanyl; ketamine	K. Chesney			

WEEK #7: (2 Clinical shifts this week)						
Date	Time		Topic		Faculty	
	1200-1300		Lunch			
	1300-1700	ACS & CVD cont.	ACS & CVD cont.			
Tue	s 10/22/24; or We	d 10/23/24 Hospital Clinical (	<mark>#4): Options: ED (Adult)   o</mark>	rthe OR (not on Sat or S	Sun)	
10/24/24 Thurs	0900-1200	HF/pulmonary edema; Cardiogenic shock; HTN; Vascular diseases; AAA; VADs	SOP: HF/Pulmonary Edema / VADs HTN   differential for dyspnea	Skills & Application: Drugs: NTG; norepinephrine   CPAP	TBD	
*Site Visit	1200-1300	Lunch				
	1300-1700	Intro to electrophysiology and ECG interpretation Lead placement;		Skills & Application: Lead placement; Measuring rate/ intervals	M. Gentile	
10/25/24 Friday	0900-1200	Week 7 Theory into practice: ECG intro review; BravoZone; Case Study/Scenario's; Student Centered Activities		tudy/Scenario's; Student	TBD	
*Site Visit	1200-1300	Lunch				
One visit	1300-1700	Theory to practice continued			TBD	
S	Sat 10/26; or Sun 10/27 Hospital Clinical (#5): Options: ED (Adult)   or the OR (not on Sat or Sun)					

WEEK #8: (2 Clinical shifts this week)						
Date	Time		Topic F			
10/28/24	0900-1030	Quiz 6		M. Gentile		
Mon	1030-1200	Quiz 6 review; Peer guided lab	Quiz 6 review; Peer guided labs			
	1200-1300		Lunch			
			Lab 9			
	1300-1700	Stations Assessment: Respiratory Assessment: ACS/AMI Assess: HF/Card shock VL DAI w/CPAP preox, oximetry, ET suctioning, PPV1, IVP meds; RAAS SGA (i-gel) PPV preox; suctioning  Goals for SMC Criteria: Via comprehensive Cardiac or Resp. scenarios Comprehensive Phys. Assessment w/ Vital Signs; (6-8) Respiratory, ACS/AMI; HF/Cardiogenic shock Via Comprehensive skill competencies in lab: ET Intubation: 1 Summative Ind. Skill in scenario; (5 of 10) * Supraglottic (i-gel): 1 Summative Ind. Skill in scenario; (4 of 4) PPV with BVM: 1 Summative Ind. Skill in scenario; (7 of 10) * ET Suctioning: 1 Extra Skill		Lab team		
	Tue 10/29/24;	Sat 11/2 Hospital Clinical	(#6): Options: ED (Adult)   or the OR (Not Sat or Sun)			
10/30/24 Wed	0900-1200	Rhythms/Dysrhythmias originating in the SA node  SOP: Bradycardia with a pulse (adult and peds)  Skills & Application Atropine, inopressors, pacing (pain/sedation), glucagon		M. Gentile		
	1200-1300		Lunch			
	1300-1700	Rhythm interpretation gr	oup work: SA node	Mike & TBD-LC		
10/31/24 Thurs	0900-1200	Dysrhythmias originating in the atria	SOP: Narrow QRS Tachycardia (adult and peds)  Skills & Application: Vagal maneuvers; adenosine, verapamil; synchronized cardioversion (sedation)	M. Gentile		
	1200-1300		Lunch			
1300-1700 Rhythm interpretation group work: Atrial				Mike & TBD-LC		
	Fri 11/1/24 or 3	Sun 11/3 Hospital Clinical	(#7): Options: ED (Adult)   or the OR (Not Sat or Sun)			

	WEEK #9: (2 clinical shifts this week)						
Date	Time	Topic	Pre-c	lass prep	Class Activity	Faculty	
11/4/24	0900-1030	Quiz 7	Quiz 7				
Mon	1030-1200	Rhythms originating in the AV Node SOP: Bradycardia with a pulse (adult and peds)					
	1200-1300						
	1300-1700	Rhythm interpretation group work; AV node			Mike & TBD-LC		
11/5/24	0900-1200	AV blocks	AV blocks SOP: Bradycardia with a pulse (adult and peds)				
Tue	1200-1300			Lunch			
	1300-1700	Rhythm interpretation grou	Rhythm interpretation group work: AVBs				
	Wed 11/6/24 Tu	ue; or Sat 11/9 Hospital Cli	nical (#8): I	ED (Adult)   or	the OR (Not on Sat or Sun)		
11/7/24 Thurs	0900-1200	Rhythms/Dysrhythmias originating in the	SOPs: Adult and peds: Wide complex tachycardia w/ a pulse, VF/ pulseless VT; Asystole/PEA		M. Gentile		
THUIS		ventricles	Skills & Application: Defibrillation, epinephrine 1 mg/10 mL, amiodarone				
	1200-1300	Lunch		-			
1300-1700 Rhythm interpretation group work: Ventricles						Mike & TBD-LC	
	Fri 11/8/24 or Sun 11/10 Hospital Clinical (#9): ED (Adult)   or the OR (Not on Sat or Sun)						

		WEEK #10: (	2 clinical shifts this week		
Date	Time		Topic		Faculty
11/11/24	0900-1030	Quiz 8			
Mon	1030-1200	Out of hospital cardiac arrest management	Policy: T-1: Triple Zero SOP: Cardiac arrest (adult and peds)	Skills & Application: CPR; mechanical CPR device O <sub>2</sub> delivery   Defibrillation Early vs. delayed ventilation	K. Chesney
	1200-1300	Lunch		Vasc. access   CA meds	
	1300-1430	OHCA cont.	Hs & Ts   ROSC care Termination of resuscitation		
	1430-1700	<b>Cardiology theory into practice:</b> BravoZone; dialogue-based instruction; case studies/simulations/scenario's/role play/mind maps static and Dynamic Cardiology Lab			Mike & TBD-LC
11/12/24	0900-1200		Lab 10		
Tue		Stations:  - AMI assessment: ASA, NTG  - Atrial dysrhythmia assessment: vagal maneuver, adenosine, verapamil  - AVB assessment: w/ and w/o atropine, norepinephrine  - Pacing  - Cardioversion / Defibrillation	Goals for SMC Matrix Criteria: Via comprehensive Cardiac scer Comprehensive Phys. Assessi Cardiac Via Formative Skill and dynamic 2 Transcutaneous Pacing: For 2 Defibrillation: Formative Indi 2 Cardioversion: Formative Ind	narios ment w/ Vital Signs; (10-12)  cardiac scenarios rmative Individual Skill (1 & 2 of 2) vidual Skill (1 & 2 of 2)	Lab Team
	1200-1300		Lunch		
	1300-1700	Lab 11			

		WEEK #10:	: (2 clinical shifts this week)		
Date	Time		Topic	Faculty	
		Stations - Unstable AMI (bradycardia w/ pulse); pacing - VT w/ pulse amiodarone IVPB; cardioversion - OHCA VF: manual CPR, BLS airway, EtCO <sub>2</sub> , O <sub>2</sub> , defib; i-gel, IO, epi; amiodarone - OHCA asystole: manual CPR, BLS airways, :EtCO <sub>2</sub> , epi; ETI, ROSC needing norepinephrine - Lucas: must place with < 5 sec CPR interruption	Goals for SMC Matrix Criteria:  Via comprehensive Cardiac or Resp. scenarios  Comprehensive Phys. Assessment w/ Vital Signs; (13-15)  Via comprehensive dynamic cardiac scenarios  1 Transcutaneous Pacing: 1 Sum. Ind. Skill in scenario; (1 of 2) *  1 Defibrillation: 1 Summative Ind. Skill in scenario; (1 of 2) *  1 Cardioversion: 1 Summative Ind. Skill in scenario; (1 of 2) *)  Via team cardiac arrest scenario X 2  Cardiac Arrest: 1 Formative Exposure (2 of 2) *  IO Access: 1 Formative; (3 of 4) *  Chest Compressions: 2 Formative Ind. Skill; (2 of 2) *  Endotracheal Intubation: 1 Formative Ind. Skill in scenario; (Extra)  SGA (i-gel): 1 Formative Ind. Skill in scenario; (Extra)  PPV with BVM: 1 Formative Ind. Skill in scenario; (Extra)  ET Suctioning: 1 Extra Skill	Lab Team	
Wed	d 11/13/24 or 11	/16 Sat Hospital Clinical (#	#10): ED (Adult – may schedule on Sun or Sat)   or the	OR	
11/14/24 Thurs	0900-1200	Stations - Severe asthma: CPAP, Epi, albuterol/ipratropium, mag - Unstable AMI bradycardia w/ pulse: atropine, norepi - TdP w/ pulse: magnesium IVPB to CPR/defib/ROSC - OHCA VF: manual CPR to Lucas, BLS airway, EtCO <sub>2</sub> , O <sub>2</sub> , defib; ETI, IO, epi; amiodarone/ROCS OHCA Asystole; manual CPR,, BLS airway, EtCO <sub>2</sub> , O <sub>2</sub> ,	Coals for SMC Matrix Criteria:  Via comprehensive Cardiac or Resp. scenarios  Comprehensive Phys. Assessment w/ Vital Signs; ( of 50)  Via comprehensive dynamic cardiac scenarios  1 Transcutaneous Pacing: 1 Sum. Ind. Skill in scenario; (2 of 2) *  1 Defibrillation: 1 Summative Ind. Skill in scenario; (2 of 2) *  1 Cardioversion: 1 Summative Ind. Skill in scenario; (2 of 2) *)  Via team cardiac arrest scenario X 2  Cardiac Arrest: 1 Formative Exposure (2 of 2) *  IO Access: 1 Formative; (4 of 4) *  Chest Compressions: 2 Formative Ind. Skill; (2 of 2) *  Endotracheal Intubation: 1 Formative Ind. Skill in scenario; (Extra)  Supraglottic (i-qel): 1 Formative Ind. Skill in scenario; (Extra)		
		BIAD, IV, epi; Hs & Ts, TOR	PPV with BVM: 1 Formative Ind. Skill in scenario; (Extra)		
	1200-1300	Lunch			
		Stations:	Lab 13 Goals for SMC Matrix Criteria:		
	1300-1700	Final prep for Practical Exam (lab buddy peer to peer assessment revolutions):  - Cardiac assessment - Respiratory assessment - Dynamic cardiac rhythm interpretation and mgt - TCP, Defib, Cardioversion - OHCA scenario	Via comprehensive Cardiac or Resp. scenarios  Patient Assessment: Review of Physical Assessment Comprehensive Phys. Assessment w/ Vital Signs Cardiac or Respiratory Via comprehensive dynamic cardiac scenarios 1 Transcutaneous Pacing: Review of Ind. Skill in scenario 1 Defibrillation: Review of Ind. Skill in scenario 1 Cardioversion: Review of Ind. Skill in scenario Via comprehensive team cardiac arrest scenario Cardiac Arrest: 1 Summative Skill in scenario (1 of 2) * IO Access: 1 Summative Ind. Skill in scenario (1 of 2) * IV Infusion: 1 Summative Ind. Skill in scenario (1 of 2) * ET Intubation: 1 Summative Ind. Skill in scenario; (7 of 10) * SGA (i-gel): 1 Sum. Ind. Skill in scenario; (7 of 10) * PPV with BVM: 1 Summative Ind. Skill in scenario; (9 of 10) * ET Suctioning: 1 Extra Skill	Lab Team	
1	1/15/24 Fri or 1	1/17 Sun Hospital Clinical	l #11: ED (Adult – may schedule on Sun or Sat)   NO C	OR .	

	WEEK #11: (1 Clinical shift this week)					
Date	Time	Topic		Faculty		
Har	per College F	Reminder: Spring 2025 [Desi	gnated Payment Due Date] November 22, 2024 (5:00	Opm)		
11/18/24 Mon	0900-1200	Cardiorespiratory & ECG Interpretation and Practice		Mike & TBD-LC		
IVIOIT	1200-1300	Lunch				
	1300-1700	CR and ECG cont'd; Dynamic C	ardiology - megacodes	Cont'd		
11/19/24 Tue	0900-1200	Cardiorespiratory & ECG Interpretation and Practice		Mike & TBD-LC		
Tue	1200-1300					
	1300-1700	CR and ECG cont'd; Dynamic C	ardiology - megacodes	Cont'd		
11/20/24 Wed	0900-1700	EMS 211 Practical Exam	Stations:  - Respiratory assessment  - Cardiac assessment  - Dynamic cardiac scenario: rhythm interpretation & mgt  - TCP, Defibrillation, Cardioversion	Lab Team		
11/21/24	0900-1230	EMS 211 Cognitive EXAM + ECO	G strip exam	M Gentile		
Thurs	1300-1400	Exam review		M Gentile		
11/22/24	11/22/24 Fri; 11/23 Sat; 11/24 Sun Hospital Clinical #12: ED (Adult – may also schedule on Sun or Sat)   No OR					

	WEEK #12 (2 Clinical shifts this week)					
Date	Time	Тор	Topic - Pre-class prep - Class Activity			
11/25/24 Mon	0900-1200	Special Patient Populati SOPs: Entire OB section; New resuscitation Policy: A-5: Relinquished New	/born care; Newborn	Skills & Application: Uncomplicated and complicated deliveries; Newborn resuscitation	J Dyer	
	1200-1300		Lunch			
	1300-1700	Normal delivery; Vaginal bleeding in the pregnant patient; Normal pregnancy (anatomy and physiology); Pathophysiology of complications of pregnancy; Assessment of the pregnant patient; Abnormal delivery (nuchal cord, prolapsed cord, breech, shoulder dystocia, prematurity, multiparity); Third trimester and antepartum bleeding (placenta previa. placental abruption); Spontaneous abortion/miscarriage; Ectopic pregnancy; Preeclampsia/eclampsia; Postpartum complications; High risk pregnancy; Complications of labor (fetal distress, premature rupture of membranes, uterine rupture); Hyperemesis gravidarum; Postpartum depression  Special Patient Populations: Neonatal Care. Newborn stabilization; Neonatal resuscitation; Anatomy and physiology of neonatal circulation				
11/26/24 Tue	0900-1200	Psychiatric or Behavioral Health Emergencies	SOP: Behavioral health emergencies; Post-Taser Policy: E-1 Emotional illness	Skills & Application: Decisional capacity asses. De-escalation   sedation & monitoring   Restraints Post Taser Procedure Suicide Screening Tool	M. Gentile	
		psychosis; Suicide ideation; use disorder/addictive behave	blence, abuse, and Neglect; Acute ression; Medical fear; Substance ognitive disorders; Thought disorders; Factitious disorders;			
	1200-1300		Lunch			
	1300-1500	Behavioral health emer	gencies cont.		M. Gentile	
	1500-1700	Clinical instructions (F	Peds and OB)		TBD-LC	
11/27/24 V	Ved; 11/30 Sa	t Hospital Clinical #13:	ED (Adult – may also so	chedule on Sun or Sat)   No C	R	

WEEK #12 (2 Clinical shifts this week)						
Date	Date         Time         Topic - Pre-class prep - Class Activity         Faculty					
11/28/24 Thu	11/28/24 Thurs Thanksgiving-OFF					
11/29/24 Fri; 12/1 Sun Hospital Clinical #14: ED (Adult – may also schedule on Sun or Sat)   or the OR						

		Week #13 (2 clinical shifts this week)			
Date	Time	Topic - Pre-class prep	Class Prep/Activity	Faculty	
12/2/24 Mon	0900-1200	Lifespan Development: (Infancy, Toddler and Preschool Age, School Age, Adolescence, Early Adulthood, Middle Adulthood, Late adulthood, Gender Identity)  SOPs: Ped's IMC	Skills & Application: Peds airways access Peds vascular access Peds fluid/drug calculation Peds cardiac arrest mgt	M. Gentile	
	1200-1300	Lunch			
1300-170		Special Patient Populations: Pediatrics Role of EMS practitioners in pediatric care, general approach to pediatric emergencies, growth and development, anatomy and physiology, general approach to pediatric assessment, general management of pediatric patients including pain management options  (*All other assessment, diagnostic, treatment and disposition modifications for pediatric-specific diseases and emergencies are integrated with other sections)		K. Chesney	
12/3/24	Tue; 12/7 Sat	Hospital Clinical #15: ED (Adult or peds – may als	so schedule on Sat or Sun)	; OR; OB	
12/4/24	0900-1200	12 L ECG	SOP: 12 L ECG	Dr. Jordan	
Wed	1200-1300	Lunch			
	1300-1700	12 L ECG cont.		Dr. Jordan	
12/5/24	0800-1200	IPE Simulation (*At Harper College) - Further details/instructions to follow			
Thurs	1200-1300	Lunch			
	1300-1430	12 lead ECG: review & interpretation			
	1430-1530	Special Patient Populations: Gynecology Vaginal bleeding, infections, ovarian emergencies, vaginal foreign (dysmenorrhea, mittelshmerz, pelvic inflammatory disease, endome toxic shock syndrome)		M. Gentile	
	1530-1700	Special Patient Populations: Geriatrics  Epidemiology and demographics of aging, complex interactions between the effects of aging on the body systems and multiple disease processes in elderly patients, pathophysiology of aging on the major body systems of geriatric patients, adapt the phases of patient assessment and diagnostic monitoring technology to guide clinical reasoning for elderly patients, common medical and traumatic emergencies in the elderly population, suspicion of behavioral and psychiatric problems-including risk of suicide, common medications of the geriatric population, toxicological effects, polypharmacy.  (*All other assessment, diagnostic, treatment and disposition modifications for geriatric-specific diseases and emergencies are integrated with other sections)  Policy: I-3: Invalid Assist   SOP: Elderly patients		M. Gentile	

WEEK #14 (3 Clinical shifts this week)							
Date	Time	Topic	Pre-class prep	Class Activity	Faculty		
12/9/24	0900-1030	Quiz 9 (covering inter-semester con	Quiz 9 (covering inter-semester content: 12 ld, OB, peds, behavioral emerg, elderly)				
Mon	1030-1200	Quiz review, prep for lab	Quiz review, prep for lab				
	1200-1300		Lunch				
	1300-1700		LAB 15				

WEEK #14 (3 Clinical shifts this week)						
Date	Time	Topic	Pre-class prep	Class Activity	Faculty	
		Stations:  - Pediatric assess: Sepsis  - Pediatric assess: Croup/RSV  - Physical Restraint Competency  - Uncomplicated delivery  - Complicated delivery	Goals for: SMC Matrix Criteri Via comprehensive Pediatric/Me Pt Assess peds w/ VS X 2 Restraint Appl.: 1 Summative. OB Delivery w/ normal newborr scenario (2 of 2) * Comp. Delivery: 1 Formative In- Distressed Neonate: 1 Formative	Skill in scenario (1 of 1) a care: 1 Form. Ind. Skill in scenario (2 of 2) *	Lab Team	
	12/	10/24 Tue Hospital Clinic	al #17: ED (Adult or peds); OR	OB; PSYCH		
12/11/24	0900-1100	Introduction to Image <i>Trend</i> and data entry practice: Bring electronic devices to class (Will be needed for case studies and Image <i>Trend</i> Reports)				
Wed	1100-1200	Assign Infectious disease project, explanation of presentation and paper requirements				
	1200-1300	Lunch				
	1300-1700	LAB 16				
	Stations  - Pediatric Cardiac arrest - Peds: Kawasaki scenario - Peds airway obstruction - BHE: Violent patient - BHE: Suicidal pt (elderly)  - Chest Cardiac Arrest: 1 Formative Exposure Extra (2 of 2) IO Access: 1 Formative Extra; (1 of *)  - Chest Compressions: 1 Formative Ind. Skill Extra; (1 of 1 FBAO Remo. w/ Magill Forceps: 1 Sum. Ind. Skill in lab (SGA –(i-gel): 2 Sum. Ind. Skill in scenario; (8 & 9 of 10) *  - Pediatric W/ pediatric airway  Distressed Neonatal: 1 Formative Ind. Skill in scenario  - Pediatric w/ pediatric airway  Distressed Neonatal: 1 Formative Ind. Skill in scenario; (10 of SGA –(i-gel): 2 Sum. Ind. Skill in scenario; (10 of Suctioning: 1 Extra Skill (8 of 9)				Lab Team	
12/12/24 Thu	<u>'</u>	Clinical #18: ED (Adult )   or the C				
12/13/24 Fri	Hospital (	Clinical #19: ED (Adult or peds) -				
End of EMS 211 and 217						

## EMS Fall semester (EMS 210, 211, 217) MUST BE DONE on 12/13/24 ENJOY your WINTER BREAK! December 14, 2024 - January 12, 2025

## **Students PLEASE NOTE:**

- PAYMENT for Spring and Summer semesters MUST BE MADE WITH HARPER College on time TO AVOID an AUTOMATED WITHDRAWL
- You will be batch registered by Harper College for the following and receive notice of payment due:
  - Spring semester 2025 (January 13 May 16): EMS 212, 213, 215 (Field internship), 218 (Hospital Clinical)
  - **Summer semester 2025 (May 22 June 5, 2025):** EMS 216 (Seminar hours and summative final exam testing)
- Students who have successfully completed the fall semester will be tentatively assigned to a host EMS agency for EMS 215 pending approval from the agency. After receiving your agency assignment via email, contact their Provider EMS Coordinator (listed in the System Directory) and schedule a meeting with the purpose of determining if placement with them is a good match.
- <u>DUE DATE FOR MEETING:</u> January 27, 2025.

		WEEK #15: (1 Clinical shift this week)	Spring Semester begins			
Date	Time	Topic	Preclass prep – class activity	Faculty		
1/13/25	Student assignment: Infectious disease written report due					
Mon	0900-1030	Environmental emergencies (Bites and envenomations)				
	1030-1200	Immune system; body defense against disease; Allergies & Anaphylaxis (adults & peds); systemic inflammatory response syndrome (SIRS), hypersensitivity, anaphylactoid reactions, collagen vascular disease, transplant-related problems, immunodeficiency syndromes (acquired or congenital)	SOP: (adult & peds) Allergic Reactions/ Anaphylactic Shock Skills & Application: Drugs (adult & peds doses): diphenhydramine, epi 1 mg/1 mL and 1 mg/10 mL; albuterol, ipratropium	M. Gentile		
	1200-1300		Lunch			
	1300-1700	Allergies and anaphylaxis cont'd				
1/14/25 Tu	e; 1/18 Sat; 1/1	9 Sun <b>EMS 218: Hosp. Clinical #20:</b> ED (A	Adult or peds – may schedule on Sat or Sun); OR,	OB, Psych		
1/15/25 Wed	0900-1200	Environmental emerg: Temperature- related illness: adult & peds	SOPs: Heat Emergencies Cold Emergencies	M. Gentile		
WCa	1200-1300	Lunch				
	1300-1700	LAB 17				
		Stations  - Assess/Rx: Mod allergic reaction  - Assess/Rx: Anaphylaxis from envenomation  - Assess/Rx Heat illness  - Assess/Rx: Cold injury; rewarming  - Cardiac arrest (peds/adult); 12 L ECG	Goals for: SMC Matrix Criteria: Via comprehensive Pediatric/Medical scenarios Comp. Phys. Assessment w/ VS; (X4) Cardiac arrest mgt (all skills) 12 L ECG	Lab Team		
1/16/25 Thurs	0900-1200	Water & altitude-emerg	SOP: Submersion/Drowning  SCUBA   High Altitude (adult & peds)	M. Gentile		
	1200-1300	Lunch				
	1300-1700	LAB 18				
		Stations  - Assess/Rx: Drowning  - Assess/Rx: the Bends/ transport to HBO  - Cardiac arrest mgt  - Assess/Rx: Pre-eclampsia-eclampsia  - 12 L ECG interpretation	Goals for: SMC Matrix Criteria:  Via comprehensive Pediatric/Medical scenarios  Comp. Phys. Assessment w/ VS; (X4)  Cardiac arrest mgt (all skills)  12 L ECG interpretation  IV drug admin (Cardiac arrest//Magnesium)	Lab Team		
1/17/25 Fri	0900-1200	Infectious disease presentations Assessment & mgt of a pt who may have an infectious dx,; decontamination of surfaces and vehicles; antibiotic resistance; for list of diseases see class handout; significant exposures and use of DICOs	Student assignment: 10 min oral presentations based on supplied criteria Skills Application: 1-2 Infection Control; sign. exposures   DICOs	Class led		
	1200-1300		Lunch			
	1300-1500	Infectious disease presentations cont.		Class led		
	1500-1700	Sepsis and Septic Shock (adult & peds)	SOP: Sepsis/septic shock	M. Gentile		

	WEEK #16: (1 Clinical shift this week)						
Date	Time	Topic		Preclass <sub>I</sub>	orep-class activity	Faculty	
1/20/2	5 (Mon.); 1/25 (Sa	at.) or 1/26 Sun <b>EMS 218: H</b>	lospital Clini	cal (#21): ED, O	R (not Sat), OB, PEDS; I	Psych	
1/21/25	0900-1030	Quiz 10				M. Gentile	
Tue	1030-1200	Endocrine disorders: A& thyroid disorders, inborn en			iseases, pituitary and	M. Gentile	
	1200-1300		Lunch				
	1300-1700	Diabetes types 1 & 2 (add etiology, pathophysiology, hypoglycemia; hyperglycer HHNS; insulin administration pancreas, disease complice	Rx of mia, DKA, on, artificial	SOP (adult and po Emergencies Skills & Application Capillary glucose a Glucagon, D10% IV	ssess	M. Gentile	
1/22/25	0900-1200	Neuro A&P				M Gentile	
Wed	1200-1300			Lunch		1	
	1300-1700	Neuro A&P cont. Neuro assessment			Skills & Application: Neurological Assessment	M Gentile	
1/23/25 Thurs	0900-1200	Medical neuro disorders seizures, dementia vs. deli headaches, Parkinson's di (ALS); Guillain-Barré Synd myasthenia gravis and othe	irium, Alzheim sease, Amyol rome; multiple	ner's disease, ateral sclerosis e sclerosis,	SOP: Seizures (adult & peds)   AMS (adult & peds)	M. Gentile	
	1200-1300			Lunch			
	1300-1400						
	1400-1700	Stroke, TIA	SOP: Stroke		Skills & Application: Stroke assess/mgt	K. Chesney	
1/24/25 Fri	Fri peds): Acute and chronic GI hemorrhage, GERD, bowel obstruction, liver and biliary tract disorders, pancreatitis, diverticulitis, cholecystitis, gallstones, Skills & Application		SOP: Acute Abd./Flank pain Skills & Application Abdominal assessment	TBD			
	1200-1300	Lunch					
	1300-1430	Abdominal and GI cont.				TBD	
	1445-1700	Genitourinary/Renal (adult & peds): Chronic kidney disease, acute & chronic renal failure, complications of dialysis, complications related to urinary catheters, renal calculi, sexual assault (female and male), GU infections, male genital conditions, others defined in the handout.  SOP: Dialysis/CKD Renal assessment			TBD		

WEEK #17						
Date	Time	Торіс		Faculty		
1/27/25	0900-1040	Quiz 11		Mike		
Mon	1040–1200	<b>Hematology:</b> Sickle cell disease, coagulopathies, blood transfusion complications, hemostatic disorders, RBC & WBC disorders, others as defined in the handout	Skills & Application Inf. Blood/blood products	Mike		
	1200-1300	Lunch				

			WEEK #17			
Date	Time		Topic			Faculty
	1300-1700	Toxicology (adult & peds): Carbon monoxide poisoning, nerve agent poisoning, opioid toxicity, how and when to contact a poison control center, poisons (inhaled, ingested, injected, absorbed), alcohol intoxication and withdrawal, toxidromes (cholinergic, anticholinergic, sympathomimetic, sedative/hypnotics, opioid, corrosive, knockdown), chronic or maintenance medications, drugs of abuse, non-FDA approved medications and supplements, Serotonin Syndrome, malignant hyperthermia, others as defined in the handout  SOPS:  Alcohol intoxication/ withdrawal Drug OD/Poisoni ng (adult & peds)		Application  Mgt for	Mike	
1/28/25	0900-1200	Theory into practice app	olication covering 212 content			Mike
Tue	1200-1300		Lunch			
	1300-1700	Stations Comp lab scenarios: Pediatric/OB/Medical Pathologies scenarios X 4 Individual skill scenarios: OB delivery w/ normal newborn care X 1 Comp.OB delivery X 1 Distressed Neonate X 1	Comp. Phys. Assessment w/ Vital Signs OD, Neuro, Sepsis, OB/Gyn Via comprehensive lab scenario: OB Delivery w/ NNC: 1 Sum. Ind. Skill in Complicated OB Delivery: 1 Sum. Ind. S w/ Distressed Neonate: 1 Summative Inc.	hysical Assessm s; (30 - 33 of 50) scenario (1 of 2) kill in scenario (1	*   of 2) *	Lab team
1/29/25	0900-1000	Peds drug calculation (math test)				Mike
Wed	1000-1200	Clinical Q&A & portfol	•			TBD-LC
	1200-1300	·	Lunch			
	1300-1700		LAB 20			
		Stations: Final prep for Practical Exam: Pediatric/Medical Pathologies scenarios, Peds Airway Access/Intubation, 12 Lead ECG Competency: OB Delivery: Normal and Complicated, Distressed Neonate, Team Pediatric Cardiac Arrest mgt	Goals for: SMC Matrix Criteria:  Via comprehensive Pediatric/Medical scen Patient Assessment: 4 Comprehensive P Comp. Phys. Assessment w/ Vital Signs Pediatric, Neuro, Sepsis, OB/Gyn Via comprehensive lab scenario: OB Delivery w/ normal newborn care: 1 of 2) Complicated OB Delivery: 1 Summative w/ Distressed Neonate: 1 Summative Ind Via comprehensive team cardiac arrest sc Cardiac Arrest: 1 Summative Skill in sce IO Access: 1 Summative Ind. Skill in sce IV Infusion: 1 Summative Ind. Skill in sce Chest Compressions: 1 Summative Ind. Endotracheal Intubation: 1 Summative Ind. PPV with BVM: 1 Summative Ind. Skill in ET Suctioning: 1 Extra Skill (9 of 9)	Physical Assessm s; (34 - 37 of 50) Sum. Ind. Skill in Ind. Skill in scenari enario nario (2 of 2) * enario (2 of 2) * enario (2 of 2) * Skill; (2 of 2) * Ind. Skill in scenario;	ario (2 of 2) o (2 of 2) o (2 of 2) ario; (10 of 10) (10 of 10) *	Lab Team
1/30/25	0900-1300	EMS 212 Practical Exam	Station: Pediatric/Medical scenarios, Peds Airway	Access/Intubation	on, 12 L FCG	TBD-LC Lab Team
Thurs 1/31/25	0900-1200	EMS 212 Cognitive EXAM a			, 12 2 2 3 3	
Fri	1230-1300	Exam Review (LC 3 &	4)			Mike

		WEEK #18 (EMS	213) (1 Clinical shift this w	veek)	
Date	Time		Topic		Faculty
2/3/25 Mon	0900-1200	of trauma, blunt trauma, p	echanism of injury, kinetics enetrating trauma, kinetics c cific tissues and organs, spe	of penetrating trauma,	M. Gentile
	1200-1300		Lunch		
	1300-1700	Bleeding: Hypovolemic sl (adult & peds) Soft Tissue Trauma: Wou puncture, incision		SOP: Shock  Skills & Application: Hemorrhage control   Fluid resuscitation	M. Gentile
2/-	4/25 Tue; 2/8 Sat;	2/9 Sun <b>EMS 218: Hosp</b>	ital Clinical #22 Options	: ED, OR; OB, PEDS, PSY	СН
2/5/25 Wed	0900-1200	Trauma Overview (adults Care; Transport and destimode Special considerations is cardiac arrest; pregnant, prognitively impaired patier	nation issues, Transport  n trauma: Traumatic pediatric, geriatric patients;	SOP: ITC (adult & peds) Trauma Triage, Transport criteria, Traumatic arrest Policy: A-2 Aeromedical Transport Skills & Application: Trauma Assessment/mgt	K. Chesney
	1200-1300	Lunch			
	1300-1700	Head trauma/traumatic brain injuries adult and peds: Life threats, epidural/subdural hematomas; subarachnoid hemorrhage (SAH); shaken baby syndrome, concussions; diffuse axonal injuries; skull fractures; increased intracranial pressure (ICP); herniation syndromes		SOP: Head trauma / TBI	M. Gentile
2/6/25 Thurs	0900-1200	Eye Emergencies: Disorders of the eye (common or major diseases of the eye); Ocular and peri-ocular trauma	SOP: Eye emergencies	Skills & Application Ocular assessment Contact lens removal Eye irrigation; protective shields; eye patching	Bill T.
	1200-1300		Lunch	_	_
	1300-1700	Spine and spinal cord trauma adult and peds	SOP: Spine trauma  Assumed knowledge: Atropine; norepi/dopamine	Skills & Application: Spine motion restriction; Protective equip removal	K. Chesney
2/7/25 Fri	0900-1200	chest; pulmonary contusion, impaled objects, hemothorax, cardiac tamponade, Commotio cordis, traumatic aortic disruption, blunt cardiac injury, traumatic asphysia, rib fractures		SOP: Chest Trauma  Skills & Application: Pleural decompression; chest seals; chest tube (monitoring/mgt)	M. Gentile
	1200-1300		Lunch		
	1300-1700	Week 18 Theory into practice: BravoZone; Case Study/Scenario's; Student Centered Activities			

	WEEK #19 (1 Clinical shift this week)					
Date	Time	Торіс	Faculty			
2/10/25	0900-1030	Quiz 12	M. Gentile			
Mon	1030-1200	<b>Abdominal &amp; Genitourinaty Trauma</b> (Adult and Peds): Blunt versus penetrating mechanisms, Evisceration, Impaled objects, Solid and hollow organ injuries, Injuries to the internal or external genitalia, Vascular injury, Retroperitoneal injuries	TBD			

		WEEK #19 (1	Clinical shift this week)		
Date	Time		Topic		Faculty
	1200-1300		Lunch		
	1300-1500	Abdominal and GU trauma	cont.		TBD
	1500-1700	Special Patient Populations (Patients with Special Challenges): Hospice/terminally ill	<u>SOPs</u> : Withholding//withdrawing Resuscitation/POLST form <u>Policies:</u> D5 POLST/DNR; M-4 Med Examiner Guidelines		M. Gentile
2/11/25 Tu	e; 2/15 Sat; 2/16	Sun EMS 218: Hospital Clini	cal (#23) Options: ED, OR (	not Sun or Sat), OB; Ped	ls; Psych
2/12/25 Wed	0900-1200	Burns-Thermal adult & peds	SOPs: Burn assessment/ITC   Thermal Burn Center Transport	Skills & Application: Burn wound management	K. Chesney
	1200-1300		Lunch		
	1300-1700	Burns cont.: Electrical, chemical, inhalation, radiation, High-pressure injection injury	SOPs: Burns inhalation (CO/cyanic Chemical	de)   Blast   Electrical	M. Gentile
2/13/25 Thurs	0900-1100			ls: Facial fractures, dental trauma, epistaxis, ane; soft tissue trauma to the face	
	1100-1200 Special Patient Populations (Patients with Special Chal				M. Gentile
		Homelessness, Poverty, Bariatrics Autism Spectrum Disorder, Orthol	Developmental disability,		
	1200-1300		Lunch		, and the second
	1300-1700	Special Patient Populations Abuse, neglect, human trafficking, interpersonal violence	Policies: V-2 Violence/abuse   V-3: Elder Abuse   V-4: Domestic Violence Mandated reporter status  SOP: Adult: Abuse   Neglect   Maltreatment   Trafficking Peds: Suspected Child Abuse/ Neglect		J. Dyer
		Recognizing and reporting abuse	and neglect, abuse/intimate partne	r violence, neglect, child maltr	eatment
2/14/25 Fri	0900-1200	Musculoskeletal Trauma (dislocations, amputations/retendon laceration/transection/stellar); soft tissue trauma; crush syndrome, suspension	eplantation, sprains/strains, on/rupture (Achilles and compartment syndrome,	SOP: Musculoskeletal trauma Assumed knowledge: pain drugs Skills & Application All splinting/bandaging procedures	M. Gentile
	1200-1300		Lunch		
			LAB 21		
	1300-1700 Inline ETI X 1		Goals for: SMC Matrix Criteria:  Via comprehensive Pediatric/Medical scenarios  Patient Assessment: 4 Comprehensive Physical Assessment Comp. Phys. Assessment w/ Vital Signs; (35 - 38 of 50) Trauma  Via individual skill  Pleural decompression: 1 Formative skill in scenario (1 of 2) In-line ETI: 1 Formative Skill in lab (1 of 2)  Apply a tourniquet Apply a cervical collar Dress and bandage soft tissue injury Apply occlusive dressing		Lab team

	WEEK #20 (2 Clinical shifts this week)						
Date	Time		Topic		Faculty		
2/17/25	0900-1030	Quiz 13			M. Gentile		
Mon	1030-1200	EMS Operations: Emergency preparedness and multiple patient/ mass casualty responses	SOP: Multiple patient incidents Active Assailant Incidents Policy: C-3: Crisis Response E-6: Episodic Mass Gathering	Skills Application: Use of START and Jump-Start triage Secondary triage Use of SMART tags	B. Stennett		
		system, Understand the p	stablish and work within the inc rinciples of Crew Resource Mar : Operational goals, Field triag	nagement			
		determination, Treatment  Mass Casualty Incidents		ter: Risks and			
	1200-1300		Lunch				
	1300-1700	MCI Continued			B. Stennett		
2/18/25 Tue	0900-1200	Week 19 Theory into practice	:: BravoZone; Case Study/Scenario's;	Student Centered Activities	M. Gentile		
	1200-1300		Lunch				
		LAB 22					
	1300-1700	Stations: Comp lab scenarios: Trauma scenarios X 2 Individual skill scenarios: Hemorrhage control X 1 Pleural decompression X 1 SMR X 2 Joint and Long Bone splint X 1 Traction Splint X 1 Multiple skills/equipment review-individual skills & in	Goals for: SMC Matrix Criteria:  Via comprehensive Pediatric/Medical s Patient Assessment: 2 Comprehensiv Comp. Phys. Assessment w/ Vital Si Trauma Via individual skill Hemorrhage control 1 Formative Sk Pleural decompression: 1 Formativ SMR Adult Supine 1 Formative Skill SMR Adult Seated 1 Formative Skill Joint splinting 1 Formative Skill in s	ye Physical Assessment gns; (39 - 40 of 50) iill in scenario (1 of 1) ye Skill in scenario (2 of 2) * I in scenario (1 of 1) in scenario (1 of 1)	Lab team		
		scenario	Long bone splinting 1 Formative S Traction splint 1 Formative Skill in s	kill in scenario (1 of 1)			
2/19/25 Wed	0900-1200	Special Patient Populations (Patients with Special Challenges): Tracheostomy care/dysfunction, ventilators	SOP: Pt w/Tracheostomy/laryngectomy	Skills & Application: Tracheostomy suctioning Exchange of trach tubes Bag to stoma ventilations	M. Gentile		
	1200-1300		Lunch				
	1300-1700	Stations: Comp lab scenarios: Trauma scenarios X 4 Multiple skills/equipment review-individual skills & in scenario	Comp. Phys. Assessment w/ Vital Si Trauma Via comprehensive lab scenario: In-line ETI: 1 Formative Skill in lab (2	gns; (41 - 44 of 50)	Lab Team		
	2/20/25 Thu		cal: ED, OR (not Sun or Sat), O	•			
	2/21 or 2/22 F	· · · · · · · · · · · · · · · · · · ·	nical: ED, OR (not Sun or Sat),				

			WE	EK #21		
Date	Time			Topic		Faculty
2/24/25 Mon	Special Pt Populations (Patients with Special Challenges): Technology dependent patients		Special Monitoring NG tubes, indwelling urinary catheter; developmental disabilities		Skills & Application: NG and OG tubes Indwelling urinary catheters G or J tubes Central vein catheters Cerebral shunts	M. Gentile
		Technology dependent (v shunts, VAD, pacemakers				
	1200-1300			Lunch		•
				<b>LAB 24</b>		
	1300-1700	Stations: Comprehensive lab scenarios: Trauma scenarios X 4 MPI Multiple skills/equipment review-individual skills & in scenario	Patier Comp Traun Multip Via co In-line	s for: SMC Matrix Criteria:  at Assessment: 4 Comprehensivo  b. Phys. Assessment w/ Vital Signa  ble Person Incident  comprehensive lab scenario:  e ETI: 1 Formative Skill in lab (1-  al decomp.: 1 Summative Skill	gns; (45 - 48 of 50) of 1)	Lab Team
2/25/25		EMS Operations		Policy: L-2: Safe Ambulance Operation	Skills Application: Emergency moves	M. Gentile
Tue	0900-1200	Emergency Response Voresponse radio communication emergency vehicles, Pedia of transport  Air Medical: Safe air med response, Medical risks/net Rescue Operations: Safe	ations atric to ical o eeds/a	<ul> <li>Risks and responsibilities ransport considerations, R</li> <li>perations, Criteria for utilizadvantages</li> </ul>	s of operating isks and responsibilities ing air medical	
	1200-1300			Lunch		
	1300-1700			Ops cont'd; mod exam re	view	
2/26/25 Wed	0900-1200	EMS Operations (Hazardous Materials): Risks and responsibilities operating on the scene of hazardous materials incid	а	SOP: Haz Mat Incidents Chemical agents   Widespread disease outbreak   Weapons of Mass Destruction	Skills Application: Chem pack requests Duo-Dote kits	Guest faculty?
	1200-1300			Lunch		
				LAB 25		
	1300-1700	Stations: Final prep for Practical Exam: Comp lab scenarios: Scenarios x 2 (Trauma and Medical) Competency: Trauma Skills: Pleural Needle Decompression, Splinting, SMR (supine/sitting)	Pat Cor Tra Via Ple Via Her SM Joi	als for: SMC Matrix Criteria: ient Assessment: 2 Comprehens mp. Phys. Assessment w/ Vital: uma and Medical comprehensive lab scenario: ural decomp.: 1 Summative Sk individual skill morrhage control: 1 Competency R Adult Supine: 1 Competency nt splinting: 1 Competency of Splinting: 1 Competer ng bone splinting: 1 Competer	Signs; (49 - 50 of 50)  ill in scenario (2 of 2) *  cy of Skill (1 of 1)  y of Skill (1 of 1)  y of Skill (1 of 1)  Skill (1 of 1)	Lab Team
				ction splint: 1 Competency of S		
2/27/25 Thurs	0900-1500	EMS 213 Final Practic Exam	<mark>al</mark>	Stations: Trauma and Medical Assectantial Cardiac arrest	essment Scenarios;	Lab Team

WEEK #21					
Date	Time	Topic		Faculty	
Ha	Harper College Reminder: Summer 2025 [Designated Payment Due Date] March 14, 2025 (5:00pm)				
	0900-1200	EMS 213 Cognitive EXAM & ECG Strip Test (Auditorium)		M. Gentile	
	1200-1300	Lunch			
2/28/25	1300-1330	Exam Review (LC 3/4)		M. Gentile	
Fri	1330-1530	Orientation to field internship (EMS 215)	Policy: P-1: Preceptor	M. Gentile	
	1530-1700	Orientation to Platinum for the field internship	•	TBD-LC	

## Prerequisites for release to start the Field Internship (EMS 215):

- Successful completion of EMS 213
- Outstanding clinical shifts for EMS 218 scheduled and approved by TBD-LC
- All outstanding patient care contacts and skill revolutions required prior to onset of Field Internship done and entered into Platinum by student and approved by TBD-LC
- All class-required simulated runs completed by student, submitted to and approved by NCH staff
- Eligible preceptor(s) identified by agency, approved by hospital educator, & paperwork submitted to M. Gentile
- Agency Field Training Agreement signed by agency administrator and submitted to K. Chesney (all completed)
- Hold harmless statement signed by student and forwarded to host agency

There are patient care contacts and skill revolutions that must be completed during the field experiences. If a student is not meeting these requirements by the middle of phase II, notify Bill so you can be scheduled for additional hospital clinical shifts. The specific numbers are listed on the Student Minimum Competency Matrix that has been given to each student.

	EMS 215 Field Experience and CAPSTONE				
Weeks: 22-33 March 1- May 16, 2025	On shift with preceptors (agency-specific hours)	IF ALL PREREQUISITES ARE MET – Eligible to start EMS 215 on March 1, 2025 Approval to start will be sent by e-mail to student; PEMSC, and hospital educator directing field internship. No ALS skills may be performed at an EMS agency prior to that approval date.			
		Policies, processes, paperwork, and student expectations for Phase I and II are very specific and require full compliance for successful completion.			
EMS 215 and 218 ends (5-16-2025) – See student handbook re: extensions					

*Summer semester begins; EMS 216: Seminar Hours and Finals (Wks 34-38)						
May: Thurs-22; Fri- 23; Tue-27; Wed-28; Thurs-29; Fri-30 June: Mon-2, Tue-3, Wed-4	0900 - 1700	Agenda for EMS 216 will be issued in late April.	M. Gentile			
Thurs 6/5/25	0900 - 1300	Final Cognitive Exam & ECG strip test (Auditorium)  Exam debrief; instructions for taking the NREMT exam, evaluations, and graduation	M. Gentile			
Fri 6/6; Mon 6/9; or Tue 6/10	10 min appointments	Student summative evaluations	M. Gentile			
Wed 6/11/25	1900-2030	Graduation! (Auditorium)	Auditorium			