Striving for Quality Patient Care, Delivered in a Compassionate and Timely Manner

Student Handbook

Student Name: ________________________________

All students in the EMS Program are responsible for reading, understanding, and following the information contained in the handbook. The EMS Program reserves the right to modify Program policies and procedures at any time.
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### Disclaimer

Information in this handbook describes the general policies of the Emergency Medical Program at the time of publication. However, changes may be made in policies, calendar, etc. Such changes will be announced prior to their effective date.
FACULTY AND STAFF

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Vice-President of Learning: Dr. Penny Cross
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Secretary: Lorrie Morgan and Debra Putman

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EMS Program Coordinator: Donnie Tipton, NREMT-P
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  Donnie Tipton
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Eugene Edwards - Sponsor Administration
Matthew Crawford - Key Governmental Official
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Mitchell Ledford – Current Student
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Johnsie Parker – EMT Coordinator
Dr. John Gossett, College President
Dr. Penny Cross, Dean Health Sciences
INTRODUCTION TO McDOWELL TECHNICAL COMMUNITY COLLEGE AND THE EMERGENCY MEDICAL PROGRAM

Introduction to McDowell Technical Community College (MTCC)
MTCC is a state-supported college. Teaching and learning constitute the central mission of MTCC. The college seeks to create a community of scholarship in which the activities of its members are consistent with the highest standards of knowledge and practice in their disciplines. As a public resource for McDowell County and surrounding, the college assists agencies in the region through the expertise of its faculty and staff.

The college catalog contains authoritative information concerning the college, student services, academic regulations, the calendar, and degree requirements. Students are to obtain a copy of the catalog and refer to it for guidance.

Mission Statement
The EMS Program strives to:

- provide a learning environment that offers the student the cognitive and technical skills necessary for a competent, entry-level paramedic
- prepare competent entry-level Emergency Medical Technician-Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains
- provide leadership in the emergency medical care community
- to provide students with the ability to effectively communicate via oral and written means

The EMS Program prepares professional paramedics at the certificate level to address the health care needs of diverse populations in the region. In accordance with its teaching mission, the EMS Program provides a scholarly atmosphere that stimulates service and creative activities by its faculty and students.

EMS Program Technical Standards for Admission
The EMS Program at MTCC is a rigorous and intense program that places specific requirements and demands on the students enrolled in the Program. An objective of the Program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals. The technical standards set forth by the Program establish the essential qualities considered necessary for students admitted to this Program to achieve the knowledge, skills, and competencies of an entry-level paramedic. The following abilities and expectations must be met by all students admitted to the EMS Program. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not be admitted into the Program.

Compliance with the Program's technical standards does not guarantee a student's eligibility for the state and national certification exams.

Candidates for selection to the EMS Program must demonstrate:

1. the mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm;

2. sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients; (students must complete a Physician’s Statement of Health Status form prior to admission into the EMS Program); (See Appendix A)

3. the ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively to patients, clinical
instructors, fellow students, faculty and staff, and all members of the health care team. Students must be able to understand and speak the English language at a level consistent with competent professional practice;

4. the ability to record the physical examination results and a treatment plan clearly and accurately;

5. the capacity to maintain composure and continue to function well during periods of high stress;

6. the perseverance, diligence and commitment to complete the EMS program as outlined and sequenced;

7. the ability to adapt to changing situations and uncertainty in clinical situations;

8. affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care;

9. the ability to participate actively in all demonstrations, laboratory exercises, clinical and field experiences in the professional Program component, to assess and comprehend the situation, and, where appropriate, the condition of all patients assigned for examination, diagnosis, and treatment;

10. the emotional health required for full utilization of the applicant’s intellectual abilities; the exercise of good judgment; the prompt completion of all responsibilities attendant to care of patients; and the development of mature, sensitive and effective relationships with instructors, classmates and all health care workers.

Applicants must be able to tolerate taxing workloads, function effectively under stress, adapt to changing environments, display flexibility, and learn to function in the face of uncertainties inherent in clinical problems of many patients. Compassion, integrity, concern for others, interest and motivation are personal qualities which each applicant must possess.

Candidates for selection to the EMS Program will be required to verify they understand and meet these technical standards or that they believe that, with certain reasonable accommodations, they can meet the standards. MTCC Student Support Services will evaluate a student who states he/she could meet the Program’s technical standards with accommodation and confirm that the stated condition qualifies as a disability under applicable laws. If a student states he/she can meet the technical standards with reasonable accommodation, then the college will determine whether it agrees that the student can meet the technical standards with reasonable accommodation; this includes a review of whether the accommodations requested are reasonable, taking into account whether accommodation would jeopardize clinician/patient safety, or the educational process of the student or the institution, including all coursework, clinical experiences and internships deemed essential to graduation.

**Student Code of Conduct**

The EMS Program believes in uncompromising legal and ethical behavior based on the standards and codes of EMS professional conduct and the laws of our community, state, and country. EMS students have the opportunity to participate in a worthy, purposeful, and progressive profession. This opportunity is not without obligation. The viability of the profession rests on the integrity as well as the capability of its members.

Further, we are dedicated to excellence as our basic performance standard. We affirm that all tasks and services provided in the context of EMS care shall be delivered in a consistently superior manner. Working together, we will approach everything we do as an opportunity for continuous quality improvement.

Students are expected to conduct themselves professionally at all times when representing themselves as students of the EMS Program and interns associated with clinical and EMS agencies. Professionalism may be demonstrated in a variety of ways, and therefore, the student must be conscious of appearance, punctuality, attitude, flexibility, courtesy, compassion, empathy, and respect and consideration of others. The EMS agencies that provide experiences and clinical sites for students are public service organizations and as such provide a service for their customers, the citizens and visitors of the counties and regions which they serve. Students serving as interns are expected to behave in the same professional manner expected of employees of the organization and abide by the rules of conduct governing those employees.
Professional conduct objectives are applicable to classroom, lab, field and clinical settings, and will include, but are not limited to, the following items.

The EMS Program Student will:
1. Comply with the rules, regulations, policies, and ethical standards of the EMT Code of Ethics. (See Appendix B)

2. Comply with the Health Insurance Portability and Accountability Act (HIPAA) rules and regulations protecting the confidentiality of personally identifiable patient health information.

3. Establish effective rapport with clinical personnel, field personnel, MTCC faculty members, and peers.

4. Seek appropriate clarification about responsibilities from appropriate sources.

5. Ask for assistance when unsure how to proceed.

6. Follow through with assignments in a timely manner.

7. Practice learned skills.

8. Strive for adaptability.

9. Perform tasks that are within the limits of competence and are necessary for assigned area.

10. Maintain the cleanliness and safety of the work area and stock appropriate supplies for lab, clinical, and field assignments.

11. Attend class and be prompt.

12. Comply with the clinical dress code.

13. Be prepared for class and clinical course work.

14. Contribute to class discussions.

15. Exhibit the highest standards of integrity and honesty.

16. Exhibit behavior which inspires the confidence of patients, peers, and faculty.

17. Treat patients, staff, faculty, and others with kindness, respect courtesy, and concern for the preservation of their privacy.

18. Maintain the highest standards of professional ethics at all times.

19. Maintain the highest standards of health, welfare, and safety for patients, faculty, staff, and other students.

20. Conduct self at all times in a dignified and exemplary manner.

21. Strive toward academic and clinical excellence.

22. Encourage and assist colleagues in the pursuit of academic excellence and improvement through team/group activities.

23. Refrain from statements that defame any person and/or the work of colleagues.

24. Respect and protect the rights, privileges, and beliefs of others.
The following conduct occurring at MTCC, at any location designated for clinical or field practice, or while attending MTCC events will result in disciplinary action, including but not limited to the possibility of Program dismissal:

1. Arson;

2. Attempting to incite or produce imminent violence directed against another person because of his or her race, color, religion, ancestry, national origin, disability, gender or sexual orientation by making or transmitting or causing or allowing to be transmitted, any telephonic, computerized or electronic message;

3. Cheating;

4. Commission of a violent offense;

5. Conduct that threatens or jeopardizes the safety of others;

6. Disruption of the educational process or operation of the EMS Program;

7. Extortion;

8. Failure to attend assigned remediation, required study hall, alternative EMS Program or other disciplinary assignment, without approval;

9. Fighting;

10. Forgery;

11. Hazings (initiations);

12. Immorality;

13. Inappropriate attire;

14. Inappropriate behavior or gestures;

15. Inappropriate public behavior;

16. Indecent exposure;

17. Obscene language or gestures;

18. Physical or verbal abuse of another person;

19. Plagiarism;

20. Possession or distribution of obscene material;

21. Possession, threat or use of a dangerous weapon, including firearms, knives, and related instrumentalities (i.e., bullets, shells, gun powder, pellets, etc.);

22. Use, possession, distribution, sale, conspiracy to sell or possess or being in the chain of sale or distribution, or being under the influence of alcoholic beverages and/or a controlled substance while indirectly or directly participating in any EMS Program class, laboratory, clinical rotation, field rotation, program workshop, function, activity, or component thereof;
23. Use, possession or distribution of, or conspiracy to use, sell or possess, a drug or illegal chemical substances;

24. Testing positive for drugs or alcohol or refusing to fully participate in or cooperate with a drug or alcohol test when instructed to do so by EMS Program faculty;

25. Possession of illegal and/or drug related paraphernalia;

26. Demonstration of insubordinate or inappropriate behavior towards any instructor;

27. Sexual or other harassment of individuals including, but not limited to, students, faculty, guests, volunteers, preceptors, and patients;

28. Sleeping or refusing to work in class;

29. Unauthorized entry to, possession of, receipt of, or use of any Program services; equipment; resources; or properties.

30. Threatening behavior (whether involving written, verbal or physical actions);

31. Use of tobacco in any form in an unauthorized location. Students are reminded that all college buildings and campus properties are smoke and tobacco free;

32. Use or possession of missing or stolen property if property is reasonably suspected to have been taken from a student, faculty member, or the EMS Program;

33. Using racial, religious, ethnic, sexual, gender of disability-related epithets;

34. Use of the EMS Program’s technology resources (i.e., computers, electronic mail, internet, and similar resources) in a manner prohibited by policies and regulations, or in any manner not authorized by EMS Program faculty or in violation of law;

35. Vandalism;

36. Willful or reckless damage to college or EMS Program property;

37. Conviction of a felony or of crime involving moral turpitude under federal or state law;

38. Conduct that evinces a conscious disregard for indifference to the health, safety, or welfare of a patient;

39. Conduct that is unprofessional, including but not limited to (a) inaccurate recording, falsifying or altering of patient records; (b) administering medications and/or treatments in a negligent manner; (c) misappropriating supplies, equipment, and drugs; (d) leaving an assignment without properly advising appropriate personnel; (e) violating the confidentiality of information or knowledge concerning a patient; (f) conduct detrimental to the public interest; or (g) discriminating against a patient on any basis in the rendering of emergency medical services;

40. Conduct that has an immediate negative effect on the educational process, or the effectiveness or reputation of the EMS Program.

41. Written information found on a student’s person, clothing, personal effects or property, book edges, notebook covers, etc. that could provide information about exam content.

42. Students found to be using any outside source to obtain an answer on a closed book in class or online quiz or exam.
43. Removal of an examination from the testing site.

44. Students shall not engage in, assist in, nor condone disruptive behavior that is defined as student-initiated acts that range from tardiness to violence. It may consist of behavior that is argumentative, disruptive to class activities, disrespectful, offensive, or threatening and may present itself physically, verbally, or psychologically. It has a negative impact in any learning environment and interferes with the learning activities of the perpetrator and other students.

45. Failure to meet the education and training requirements prescribed by the Program.

46. Forgery, alteration, or misuse of any Program document, record, key, or electronic device.

47. Theft or abuse of program electronic resources such as computers and electronic communications facilities, systems, and services. Abuses include (but are not limited to) unauthorized entry, use, transfer, or tampering with the communications of others; interference with the work of others and with the operation of computer and electronic communications facilities, systems, and services; or copyright infringement.

48. Stalking behavior in which a student repeatedly engages in a course of conduct directed at another person and makes a credible threat with the intent to place that person in reasonable fear for his or her safety, or the safety of his or her family; where the threat is reasonably determined by the Program to seriously alarm, torment, or terrorize the person; and where the threat is additionally determined by the program to serve no legitimate purpose.

49. Harassment by a student of any person. Potential definition of harassment may include: a) the use, display, or other demonstration of words, gestures, imagery, or physical materials, or the engagement in any form of bodily conduct, on the basis of race, color, national or ethnic origin, sex, religion, age, sexual orientation, or physical or mental disability, that has the effect of creating a hostile and intimidating environment sufficiently severe or pervasive to substantially impair a reasonable person’s participation in program activities, or use of program facilities; b) must target a specific person or persons; and c) must be addressed directly to that person or persons.

50. Selling, preparing, or distributing for any commercial purpose course lecture notes or video or audio recordings of any course unless authorized by the Program in advance and explicitly permitted by the course instructor in writing. The unauthorized sale or commercial distribution of course notes or recordings by a student is a violation of these policies whether or not it was the student or someone else who prepared the notes or recordings.

51. Abandoning or neglecting a patient during the provision of emergency care.

52. Performing or attempting emergency care, techniques or procedures without proper permission, authorization, licensure, education or supervision.

53. Discriminating in rendering emergency care because of race, sex, creed, religion, national origin, medical condition, sexual orientation, or ability to pay.

54. Medical misconduct or incompetence, or a pattern of continued or repeated medical misconduct or incompetence in the provision of emergency care.

Confidentiality of Student Records

In accordance with institutional policy and the U.S. Family Education Rights and Privacy Act (FERPA), the Program vigorously protects the privacy of students’ education records. The Program does not release private records without prior written consent of the student or guardian if the student is less than 18 years of age. Any copies of records should be obtained prior to graduation. Students and former students have the right to review their official records. Student records will be maintained for four years. After the four year period, records will be destroyed in accordance with Privacy standards.
Health Insurance Coverage
Accidents or illness may occur as a result of coming in contact with the clinical and field internship environments. Medical evaluation, treatment, and follow-up care following an accident or incident are the financial responsibility of the student. Students must comply with the health insurance requirements of the college.

Incident Reporting
All incidents, injuries, and unusual occurrences on campus are to be reported immediately no matter how minor they seem. Notify the instructor responsible for the course. All incidents, injuries, and unusual occurrences in the clinical or field setting are to be reported immediately no matter how minor they seem and followed with written documentation.

Absences for Religious Observances
The EMS program faculty recognizes the right of the student to practice their religion freely and to be excused from course/clinical attendance to observe their individual religious practices. To obtain permission to be absent for religious reasons, a student must get permission from the lead instructor. Students are encouraged to discuss these absences with the faculty member prior to the event. When the student has notified the instructor prior to he/she shall be given the opportunity to make up any tests or other work missed due to an excused absence for a required religious observance.

Email
The EMS Program faculty communicates frequently via email. Students are expected to check their email address account frequently for email communications.

Parking of Motor Vehicles
Students shall park motor vehicles within the designated parking spaces. Parking shall be in a proper manner. MTCC may have improperly parked vehicles towed at the student or owners expense.

POLICIES AND PROCEDURES
The EMS Program reserves the right to modify program policies and procedures at any time. Students must periodically consult their EMS Program faculty advisor to obtain current information. The EMS Program will make every effort to notify currently enrolled students of any changes. Students must keep the EMS Program informed of their current local address, phone numbers, and email address.

A form acknowledging the student’s receipt of the information in this Handbook is found at the end of this document. Another copy of this form will be provided for the student to sign. The signed copy will be placed in the student’s EMS Program file.

Prerequisite: High School Diploma, GED or equivalent. Completed & successively passed a EMT Program Approved by N.C. Entrance Exam as Approved by Program Director and MTCC

Pre/CoRequisite: Anatomy/Physiology

Students With Disabilities
It is the policy of the EMS Program and the college to adhere to the requirements of the Americans with Disabilities Act. Students admitted to the EMS Program are expected to be able to complete curriculum requirements which include physical, cognitive, communication, and behavioral core competencies that are essential to the functions of the professional paramedic. These core competencies are considered to be the minimum and essential necessary to protect the public.

The EMS Program makes every effort to provide reasonable accommodations for students with documented disabilities in compliance with the Americans with Disabilities Act. Students who require disability services or reasonable accommodations must identify themselves as having a disability and provide current diagnostic documentation to Disability Services. All information is confidential. Students receiving accommodations must bring the personalized education plan to the instructor no later than the second week of class.
Contacting Faculty Members
EMS Program students have access to some faculty members’ personal cell phone numbers. Students are reminded that use of these numbers is restricted to emergencies. Certain faculty members also use text messaging. Students are to use the “Three Before Me” process. This means that students must contact a minimum of three (3) peers AND check at least three (3) places (syllabi, notes, MTCC EMS webpage, Blackboard course shell, etc.) PRIOR to contacting the instructor via cell phone, email or text messaging. Information the student already has access to will not be provided.

Office Hours
Office hours can be obtained by making an appointment.

EMS Course Sequencing
EMS courses are sequenced; that is courses must be successfully completed in order, ex: first semester course is to be completed before enrolling in second semester courses. Paramedics may take EMS courses out of sequence with Program Director approval. All sections are required for graduation.

Semester Completion
The student must have had an 80% average and a 90% attendance for the semester and passed the end of semester exam to include didactic/cognitive, psychomotor and affective evaluations. The student must have completed all clinical and internship skills, leads and assessments for the semester. Upon successful completion the student should be recommended to continue to the next semester.

Criteria for Graduation
To graduate a student must have successfully completed all components of the program to include all semesters of classroom, labs, hospital clinical, and field internships and passed a final written exam and scenario. The exam and scenario will test for didactic/cognitive, psychomotor and affective behaviors.

Grade Scale
The grading scale is the one outlined in the catalog:

- A = 93 - 100
- B = 85 – 92
- C = 77 – 84
- D = 70 – 76
- Skills are P/F

Exams - 40% Quizzes - 20% Homework – 5% Lab/Skills P/F Affective –10% Final Exam 25%

Student Instruction
At no time will a student be substituted for an instructor or preceptor. Students will be with a credentialed preceptor with a higher certification than the student currently possesses.

Documentation Required Upon Admission to the EMS Program
All required documentation for students must be submitted prior to beginning the EMS Program. Students must supply documentation covering the inclusive period of time in which they are enrolled in clinical courses. Failure of any student to conform to any documentation deadline will result in the student’s inability to begin clinical and field rotations and potential deductions from the student’s final clinical course grade.

Required Documents
Student Health Form
All EMS students must have on file with the EMS Program a completed Student Health Form. The EMS Program Student Health Form remains current for the time the student is enrolled in the Program. The student must inform the EMS Program Director or Medical Director of any changes in physical and emotional health which would interfere with providing safe care during the time the student is enrolled in the Program. (See Appendix A)

EMT Certification
Students participating in clinical and field rotations are required to have North Carolina Office of Emergency Medical Services EMT certification. Each student will provide a photocopy of a card that documents successful
completion. A copy of this card will be kept in the students’ clinical file. The credentialing must remain current during the duration of the students’ time in the EMS Program.

**CPR Certification**

Students are required to have American Heart Association BLS for the Healthcare Provider certification. Each student will provide a photocopy (front and back) of a card that documents successful completion. A copy of this card will be kept in the students’ clinical file. The card must be carried on the students’ person during all clinical and field internship rotations. The certification must remain current during the duration of the students’ time in the EMS Program. Students are responsible for finding a recertification class prior to card expiration date. The EMS Program cannot ensure the availability of a recertification course.

**Immunizations**

Prior to being permitted in the clinical setting, each student must provide proof of having the following immunizations: This list is subject to change as it is dependent on clinical site requirements.

1) MMR

2) Tdap

3) Tetanus booster (within the last 10 years)

4) TB skin test (within the last 1 year) or chest x-ray if positive skin test/document activity to test (within the last 5 years)

5) Hepatitis B immunization (within the last 5 years). If the vaccination is older than 5 years a titer is required to verify protective antibodies. If a student wishes they may sign a declination form for the vaccination/titer.

6) Varicella vaccination (within the last 5 years). If the vaccination is older than 5 years prior or the student has had the disease a titer is required to verify protective antibodies.

7) Annual Flu vaccination (to be completed in the Fall of each year). The deadline for the Flu vaccination will be set each year by the Clinical Coordinator.

Vaccinations are required to attend clinical rotations. Students will not be permitted into the clinical setting until each of these is on record with the Clinical Coordinator. Health waivers (other than allergy or a chronic medical contraindication) will be considered to be temporary and students will be expected to obtain vaccinations. Religious waivers for vaccinations will be reviewed on a case by case basis by the MTCC EMS faculty and corresponding clinical sites. Clinical sites have the ultimate decision on the student’s ability to attend rotations. Alternative rotations cannot be guaranteed and the student may not be capable of completing the state required number of clinical hours.

**Criminal Background Checks**

Students must have a criminal background check prior to beginning clinical and field rotations. These criminal background checks will be performed at the students’ expense. Students will be given instruction on how to submit information for the background check. Students should be aware that they may not be able to complete clinical assignments if they do not pass the criminal background check.

**Transportation**

Students are expected to provide their own transportation to and from their clinical and field assignments. Any traffic violations incurred enroute to and from clinical and field assignments are the responsibility of the student.

**Hours of Class**

The EMS Program has a challenging curriculum, consisting of didactic, laboratory, clinical, and field rotations. Students should be aware that class schedules many times are non-traditional, occurring in the evenings and weekends. Students should remain flexible in their scheduling of extraneous events.
Emergency Medical Program Examination Policy
The following examination policies have been implemented to limit academic dishonesty, to assure exam integrity and to maintain a fair testing environment for all students enrolled in the EMS Program. Students who require testing accommodation(s) should meet with the course instructor prior to the test administration date to discuss how accommodations will be honored without jeopardizing exam integrity.

1. Food and drinks (including water) are not permitted in the classroom, laboratory or computer lab where the exam is being administered. All such items should be left in the area designated by the exam proctor prior to being seated for the examination.

2. Electronic devices (including, but not limited to, cell phones, MP3 players, IPads, IPods, cameras and calculators) are not permitted in the classroom, laboratory or computer lab where the exam is being administered. All such items should be turned off and left in the area designated by the exam proctor prior to being seated for the examination. If a calculator is required for the examination, the exam proctor will notify students of this prior to the beginning of the examination.

3. Personal items such as hats, scarves, jackets and outerwear must be removed and stored in the area designated by the exam proctor prior to being seated for the examination.

4. If necessary, during computerized testing, the examination proctor will supply students with blank scratch paper. At the conclusion of the examination, all notes taken by the student during testing will be turned in to the exam administrator.

5. Students may be asked by the test administrators to empty your pockets.

6. Students will not have access to your personal items during the test.

7. Students are not permitted to leave and re-enter the classroom, laboratory or computer lab where the exam is being administered without permission of the exam proctor. In general, students should plan to remain in the classroom, laboratory or computer lab where the exam is being administered throughout the examination period. Therefore, students should attend to all personal needs prior to initiating the exam.

8. At the conclusion of the examination, all exam materials (including test booklets, exams, scratch paper, answer sheets, etc.) will be returned to the exam proctor. Under no circumstances, may any examination materials be removed from the classroom, laboratory or computer lab where the exam is being administered.

Violation of any of the examination policies is grounds for dismissal from the testing area, failure of the examination, failure of the course and dismissal from the EMS Program.

Computer Usage
Students are prohibited from using classroom computers for checking email, surfing the Internet, etc.

Video Recording
Many of the laboratory sessions and scenario testing are digitally recorded. This provides the student the opportunity to review his or her performance. The recordings will be utilized for teaching, advertising and learning purposes only.

Tobacco
MTCC is a tobacco Free Campus.

Clinical Purchases
Students are expected to purchase a minimum of two (2) clinical uniforms and safety glasses to be worn during rotations. Students must also purchase a electronic documentation system utilized by MTCC for tracking skills performed during clinical and field rotations. In addition, students will take a electronic paramedic practice examination during the spring of their senior year. This carries a small fee.
**Uniforms**
Students shall wear program attire in the classroom during the program unless otherwise directed by the instructor. Classroom attire consist of the following: gray shirt with MTCC logo, black BDU pants, black military style boots and black belt. All attire must be clean and neat. The wearing of hats in the classroom is prohibited. **Failure to comply with uniform standards will result in a 1 point deduction from your final grade for every 4 hour block you are out of uniform.** The lead instructor will designate which style shirt will be worn on what days.

**Exposure Control Plan**
Universal precautions shall be observed with all human body fluids, patients, and unknown suspicious substances. According to the concept of Universal precautions, all human blood and certain body fluids are treated as if known to be infectious for Human Immunodeficiency Virus, Hepatitis B Virus, and other bloodborne pathogens.

1. Use non-sterile gloves when handling blood, body fluid, secretions or excretions. Disposable gloves must be replaced as soon as practical when contaminated. Gloves will be changed after contact with each patient and before touching environmental surfaces.

2. Gowns or lab coats must be worn if soiling of clothes with blood or other body fluids is anticipated. Masks and eyewear are necessary only when splatter of body fluids is anticipated.

3. Needles, syringes, and other sharp objects should be disposable and should be disposed of in rigid puncture-resistant, leak-proof containers. Further, needles should not be recapped, nor should they be removed from a disposable syringe because needle stick injuries are most likely to happen during these activities. The use of needle cutting devices is not recommended for needles attached to disposable syringes but may be practical for vacutainer systems when on disposable jackets or when intravenous sets are withdrawn. All needles shall be considered contaminated. Broken glassware, which may be contaminated, must not be picked up directly with the hands. Use a brush, dustpan, tongs, forceps, etc.

4. Instruments, work areas, and non-disposable items contaminated with blood or body fluids should be safely decontaminated with 1:10 dilution of 5.25% sodium hypochlorite (Clorox) and water or tuberculocidal disinfectants (e.g., osyl or septicol).

5. Reusable containers shall not be handled or cleaned manually.

6. Mouth pipetting of all liquids, body fluid or specimens in the laboratory are not allowed. Mechanical pipetting devices must be used.

7. There will be no eating, drinking, applying of lip balm, manipulation of contact lenses, smoking or tobacco use in field or clinical settings. There will be no storage of food in patient care areas.

8. At present, commercially obtained laboratory reagents or controls derived from blood products should be treated as potentially contaminated specimens.

9. Infectious waste shall be "red bagged" and placed in leak proof containers which are labeled with the "Biohazard" symbol and autoclaved/disinfected properly before discarding in the trash.

10. All personnel should wash their hands following the completion of laboratory activities, after removal of gloves and protective clothing, and before leaving the laboratory, clinical setting, patient room/contact, or contaminated work area. If hand-washing facilities are not available antiseptic hand cleansers are to be used. Hands are to be washed as soon as feasible.

11. Contaminated materials (non-regulated Medical waste): paper towels, sponges, etc; should be double bagged and tagged for disposal in the county landfill.

12. Contaminated laundry shall be handled wearing gloves and placed in "Biohazard" marked, orange or red bags immediately after use.
13. There is always a possibility that trash bags/cans could contain a hypodermic syringe/needle. If these items are encountered they should not be removed.

14. If body fluids are involved in a cleaning job use 10 parts water and 1 part bleach to decontaminate. If broken glass is present do not pick it up with your hands use a broom and dust pan.

15. If fluids contact personal clothing or equipment, these items should be washed thoroughly in 10 parts water and 1 part chlorine bleach. If a student’s primary clinical uniform becomes contaminated, the student is required to change into a second clinical uniform. Students must always have on hand a second set of uniforms, this is an OSHA requirement.

**Post-Exposure Evaluation and Follow up**
In the event of exposure to a body fluid(s) occurs during clinical or field rotations, the exposed student should report this immediately first to the preceptor and then to the Clinical Coordinator. Students should consult the National Clinician’s Post Exposure Prophylaxis Hotline (PEPLine) at 1-999-448-4911 for up-to-date guidelines of post exposure treatment and evaluation of the severity of the exposure. The PEPLine may be contacted by students who are concerned about the nature of the exposure. Students who are unsure or have questions are directed to contact the professionals at the PEPLine for expert evaluation concerning the nature of their exposure. The following steps should then be taken after an exposure:

1. In the event of an exposure to eyes, mouth, mucus membrane, non-intact skin or parenteral contact, the area contacted should be washed with soap and water immediately.

2. Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred and turned into the program director.

3. Students must complete all site required procedures and documentation, including drug screening.

4. Identification and documentation of the source individual, unless it can establish that identification is infeasible or prohibited by state or local law.
   - The source individual’s blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, it should be documented that legally required consent cannot be obtained.
   - When the source individual is already known to be infected with HBV or HIV, testing for either is not required.
   - Results of the source individual's testing shall be made available to the exposed student when allowed by state/federal regulations, and the student shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

5. The student may seek medical attention at the medical facility where the student is attending clinical or a facility of the student’s choice. The student may deny treatment. Any treatment the student receives is the financial responsibility of the student.

6. Collection and testing of the exposed student's blood for determining HIV and HBV serologic status.
   - The exposed student's blood shall be collected as soon as feasible and tested after consent is obtained.
   - If the student consents to baseline blood collection, but does not give consent at that time for HIV serologic testing the student takes responsibility.

7. Post-exposure prophylaxis will be administered when medically indicated. And when approved by the exposed individual.

8. Counseling on the immediate and long-term effects of potential infectious agents will be discussed with the exposed individual. All assistance possible will be given to the exposed individual in acquiring any desired counseling both physical and psychological.
9. The exposed student will be encouraged to report all related diseases and problems to the treating medical facility.

**Sexual Harassment**
During the course of the EMS Program, there will be discussions that will include genito-urinary and reproductive content. There will also be hands-on physical examinations. If there ever is any inappropriate or unwelcome behavior in any EMS course that is of a sexual nature, on the part of the instructor or peers, it must be attended to and it must cease. This requires effective communication and a system for registering complaint with faculty, program director, and/or a liaison. Students should have a familiarity with and understanding of this policy and of the grievance procedures for individual action. Actions may be in the manner of a formal complaint procedure or in the manner of informal assistance.

**Criminal Convictions**
Students are responsible for immediately notifying the EMS Program Director of any criminal convictions, including serious traffic violations, incurred during the students’ time in the EMS Program.

**Photographs**
Students are prohibited from taking photographs while in clinical and/or field settings. Violation of this policy will result in disciplinary action, up to and including Program dismissal.

**Social Networking Sites**
Students must be concerned with any behavior that might embarrass themselves, their fellow students, preceptors, clinical sites, the EMS Program/faculty, and/or the college. **This includes any and all activities conducted online.** MTCC recognizes individual’s expression of first amendment rights of free speech, including participation online social networking sites (Myspace, Facebook, Xanga, Bebo, Zoogs, Friendstar, Twitter, etc.). The college does not place any restrictions on the use of these sites by students. We remind you that as an EMS student completing clinical rotations, you are a representative of the EMS Program, the profession, and the college and you are always in the eye of the public (even online). Please keep the following in mind:

- Understand that anything you post online is available to anyone on the planet. Any text or photo is completely out of your control the moment you place it online (even if you limit access to your site).
- Do not post information, photos, or other items online that could embarrass you, your fellow classmates, clinical preceptors, clinical sites, program faculty, or the college. This includes photos and items that may be posted by others on your page.
- Students will face disciplinary actions up to and including dismissal for violation of the standards of philosophies of the college and/or the Program.
- Students should be aware that by posting identifying photos of patients and/or patient belongings they are violating federal rules and regulations (HIPAA). Students who violate HIPAA can face disciplinary action up to and including Program dismissal as well as legal recourse if a patient determined necessary.

**EMS Program students are prohibited from:**

- using a Weblog to criticize or embarrass the EMS Program or any stakeholders, preceptors, hospitals, EMS agencies faculty, students, etc. Do not post information, photos, or other items online that could embarrass you, your fellow classmates, clinical preceptors, clinical sites, EMS faculty, or the college. This includes photos and items that may be posted by others on your page or other selective membership pages.
- posting photos, videos, or images of any kind which could potentially identify patients, addresses, vehicle license plate numbers, or any other Protected Health Information (PHI). PHI includes, but is not limited to the patient's name, address, age, race, extent or nature of illness or injury, hospital destination, and crew member names.
- posting any written or photographic patient information or description of EMS calls, occurrences in clinical settings, preceptor criticisms within any social networking service.
- posting or other online activities which are inconsistent with or would negatively impact the EMS Program’s reputation
- engaging in vulgar or abusive language, personal attacks of any kind, or offensive terms targeting individuals or groups
- posting statements which may be perceived as derogatory, inflammatory, or disrespectful
• adding faculty, preceptors, other hospital or EMS employees, or patients as “friends” on their social networking sites

**Pregnant Student Policy**
Any student that is pregnant is encouraged to notify the Clinical Coordinator, Program Director, and Medical Director of her condition. Confidentiality will be maintained concerning the student’s condition. Pregnancy will not preclude a student from participation in all courses and/or clinical activities. A pregnancy will be treated as a medical condition or “leave of absence.” This includes pregnancy, childbirth, false pregnancy, termination of pregnancy, and recovery for as long as deemed necessary by the student’s obstetrician and the Program Medical Director.

Pregnant students will not be allowed to participate in clinical rotations without seeking clearance from the Program Medical Director and their personal obstetrician. Any student that is unable to complete clinical rotations due to pregnancy or its complications will receive an incomplete and will be required to complete the clinical course at a later time.

**Insubordination**
All students in the EMS Program are expected to comply with all college rules, regulations, and policies including the Code of Student Conduct and this policy statement.

1. Students are expected to be honest and truthful, to act with integrity, to respect both college and community standards, and to have ethical responsibility. Examples include but are not limited to:
   a. falsification of documentation
   b. misrepresentation of facts in oral, written, or electronic communication
   c. making false accusations against another person in either oral, written, or electronic communication
   d. threatening, intimidating, or creating a hostile environment for other students, faculty, staff, or preceptors
   e. misrepresentation of the student’s academic or certification status at MTCC, the EMS program, or with any state/federal certification agency

2. Academic Authority: Students must accept and follow the directions of their instructors in their courses/classrooms, their academic advisors, the deans of their academic units, and other legitimate campus authorities. By enrolling at MTCC, the student inherently accepts the rules of the institution and the directions of the faculty and administrative staff. This includes accepting academic policies and procedures with regard to course schedules, registration, financial aid, payment arrangements, enrollment in specific courses, following course sequences, prerequisites and all related academic matters. The deans of the academic units and the provost have broad final authority to resolve student academic issues. Insubordination, which is the refusal to follow a legitimate direction, may be grounds for disciplinary action up to and including dismissal from the EMS Program.

3. Students enrolled in the EMS Program have special professional conduct expectations. Students in professional programs and on internships must comport themselves according to all of MTCC’s policies as well as according to the norms and standards of their professional associations and industries. Students who violate professional standards or workplace rules will incur disciplinary action up to and including Program dismissal, for violations of professional conduct norms. Insubordination, unprofessional, and/or unethical behavior towards peers, EMS faculty, MTCC faculty, staff, or preceptors will NOT be tolerated.

Students will receive written reprimands for improper behavior. Students receiving written reprimands may face disciplinary action up to and including EMS Program dismissal. Written reprimands are cumulative across all EMS Program faculty members, courses, clinical rotations, and activities as well cumulative across semesters. For grievous infractions disciplinary action may be taken immediately. All warnings will be reviewed by the EMS Program faculty. Students will be informed of their infractions and will meet with the faculty to review the written reprimand. Students will be allotted the opportunity to voice their concerns and views. All infractions will be signed by EMS Program faculty as well as the involved student and placed in the student’s EMS Program file.

**Student Right to Appeal**
A student may appeal any decision to enforce discipline as a result of academic or behavioral misconduct to the Program faculty. Students must write out an appeal and submit it to the Program faculty within five days of the disciplinary decision.
**Academic Dismissal**
EMS students must maintain a cumulative grade of 80% overall and demonstrate professional and safe paramedic practice. Students who fail to meet these retention standards will be dismissed from the EMS Program. Students are expected to maintain a running calculation of their status as exam and other grades accumulate. Students who find themselves in danger of falling below the standards should consult with their course instructor and program director about their weaknesses and available resources. Any student who is dismissed or drops due to low scores has the option of reapplying to the EMS Program.

**Health Problems**
The student, in the opinion of the supervising faculty, has a physical or behavioral health problem that interferes with safe practice, will be removed from learning experiences (classroom, clinical, laboratory, or field) until the health problem is resolved to the satisfaction of the Program Director or Program Medical Director. A health problem may be generally defined as behavior that is injurious or potentially injurious to the student, his/her patients, or other persons. The health problem may include the use or abuse of prescribed or un-prescribed substances, including alcohol that results in conduct that is detrimental to a classroom, seminar, clinical, field, or laboratory experience. In an effort to ensure safe clinical practice, the EMS Program retains the right to perform drug screens on students at its discretion and at the student’s expense. Please see the Alcohol and Illegal Drug Testing Policy.

**Removal From a Learning Experience**
If the problem behavior is detrimental to a classroom, seminar, clinical, field, or laboratory experience, the student will be removed from that learning experience. At such time a conference will be scheduled between the faculty and student as soon as practical to discuss the behavior problem and possible alternate experiences that will guarantee both safe practice and accomplishment of course objectives. A written record of this conference will be placed in the student’s file, and the student will be given opportunity to make written comments of his/her own. The student may be required to obtain professional help for any health problem that is not temporary. The entire cost of such help shall be the student’s responsibility. The student must give the person providing help permission to report to the EMS Program that the student is receiving help.

**Dismissal From the EMS Program**
Dismissal from the EMS Program due to a health problem may occur in the following situations:
1. If the conduct persists and the student does not get the required professional help.
2. If the health problem is so long-term that missed experiences cannot reasonably be made up before the end of the session. The student may, in this situation, withdraw from the course.
3. If the health problem is not responsive to treatment, or the student continues to demonstrate insufficient improvement in safe practice, he/she will be dismissed from the Program and remain ineligible for readmission until safe practice can be demonstrated.

Before the student is dismissed, a conference will be scheduled between EMS Program faculty and the student to discuss the health problem. A written record of this conference will be placed in the student’s file, and the student will be given opportunity to make written comments of his/her own.

**Improper Conduct**
The EMS Program faculty has an academic, legal, and ethical responsibility to protect members of the public and of the health care community from unsafe or unprofessional practice. It is within this context that students can be academically sanctioned, disciplined, or dismissed from the Program.
Improper conduct is defined as:
1) an act or behavior of the type that is prohibited by any North Carolina statute regulating the practice of the profession;
2) an act or behavior that violates the Code of Ethics established by the National Association of Emergency Medical Technicians;

3) an act or behavior that threatens, or has the potential to threaten, the physical, emotional, mental, or environmental safety of the patient, a family member or substitute familial person, a bystander, another student, a faculty member, or other health care provider;

4) an act or behavior that constitutes practice that a student is not trained or authorized to perform at the time of the incident;

5) use of alcohol during the eighteen (18) hours prior to an assigned clinical or field rotation and during the eight (8) hours prior to a class, lab, or other didactic setting.

Investigation and Evaluation

Should a student, while in a clinical or field rotation or while in a classroom or laboratory setting, be judged by the clinical faculty member, EMS preceptor, hospital staff preceptor, or unit director/supervisor, or faculty member to demonstrate improper conduct, that student will be required to leave the area immediately. As soon as possible, the Program Director, Medical Director, Clinical Coordinator, and/or other EMS faculty members will meet with the student to discuss the incident. This meeting will be documented. A copy of the report will be placed in the student’s EMS Program file. For the initial incident, it will be the responsibility of the Program Director, Medical Director, Clinical Coordinator and EMS faculty members to determine what action will be taken. They may:

1) require the student to return to the laboratory for review and practice before returning to the clinical or field site;

2) make other assignments deemed appropriate to upgrading of the student's skills and/or behavior;

3) set restrictions on the scope of clinical and field practice once the student returns to the clinical facility or EMS agency;

4) require an immediate drug testing specimen be submitted at any time in a clinical or field rotation that a student is suspected of being an impaired clinician; or,

5) if the act or behavior is deemed serious enough, dismiss the student from the EMS Program.

The decision shall be in writing with copies given to the student, the Program Director, Medical Director, and a copy placed in the student’s EMS Program file.

Any safety or professionalism violation that results in severe actual or potential harm to individuals encountered in the clinical setting may warrant a failing grade in the clinical course at the discretion of the EMS Program faculty.

Program Dismissal

The Program Dismissal Committee shall consist of, when possible, the Program Director, the Medical Director, the Clinical Coordinator, and EMS Program faculty, when the absence of one is necessary a fourth faculty member shall be in place. Dismissal from the Program may occur for the following reasons:

1) failure to maintain an over 80% average;

2) an initial incident of improper clinical, field, classroom, or laboratory conduct when such conduct is determined by the appropriate faculty member(s) to warrant such action;

3) a second incident of improper clinical, field, classroom, or laboratory conduct during a single semester
4) insubordination to any MTCC faculty or staff member, EMS Program faculty, clinical preceptors, invited guests, or fellow students in accordance with the insubordination policy

5) failure to abide by the Academic Dishonesty Policy

At the dismissal meeting, a faculty member shall present the information which has resulted in the convening of the committee. The student may request to be heard at the meeting. The committee may vote to:

1) dismiss the student from the EMS Program;
2) allow the student to continue in the EMS Program;
3) allow the student to continue in the EMS Program with provisions.

A written copy of the committee's decision will be forwarded to the student and placed in the student's file. If the student is dismissed from the EMS Program for improper clinical conduct, a grade of "Below 80%" (unacceptable clinical work) will be recorded in the appropriate clinical course. This may occur at any time during the semester, even during the course withdrawal period.

If the student or faculty member is dissatisfied with the outcome of the program's deliberation, they may appeal.

**Non-academic Criteria For Continuation in the Emergency Medical Program**

Students are expected to be familiar with and adhere to the professional and ethical guidelines in the Emergency Medical Technician Code of Ethics. (See Appendix B) Failure to do so may result in immediate dismissal from the EMS Program. Students may also be dismissed for violating academic honesty policies as described in the MTCC Catalog. Students are expected to demonstrate the ability to meet technical and professional performance standards outlined in the EMS Program Student Handbook. All students will be evaluated by these standards by the EMS Program Committee each semester. The EMS Program Committee will consist of the Program Director, Medical Director, Clinical Coordinator, and all EMS Program faculty members. If it is determined that the student has issues of concern that are presently hindering his or her performance, or will potentially hinder his or her performance in the future, he or she will be notified in writing of the issue(s) by the EMS Program Director. The student will be invited to present his or her views to the Program Director depending on the nature of the issue.

Decisions of the Committee may include:

1. Continuance in the EMS Program
2. Provisional continuance in the EMS Program. Continuance will be permitted provided specific criteria are met within a specified time frame. The criteria will be specified in writing and a follow-up meeting will be held to consider whether the criteria have been met
3. Dismissal from the EMS Program

A student who is dissatisfied with the decision of the Committee may appeal the decision in writing to the Program Director within five days of the decision. The student must specify reasons for disagreement with the Committee’s decision. The Director of the Program will review the appeal and will make the final decision. A student who is dismissed from the EMS Program may choose to appeal to Continuing Education Director. The Continuing Education Director’s decision will be final.

**Alcohol and Illegal Drug Policy**

MTCC is committed to maintaining a drug-free workplace and academic environment in compliance with the federal Drug Free Workplace Act of 1988. The College is committed to provide campus experiences for its students that are safe, legal, and responsible.

**EMS Program Interests**

The faculty, clinical preceptors, and field preceptors in the EMS Program have a responsibility to prepare students to become competent, safe, and ethical practitioners. This responsibility extends to protecting the public from unsafe and unprofessional conduct of its students. It is under this responsibility that the Program follows a “No Tolerance” policy regarding alcohol and/or drug use or abuse by EMS students. Students enrolled in the Program will face
disciplinary action up to and including Program dismissal for the use of illegal substances, abuse of legal drugs or alcohol abuse.

It is expected that students under the legal age of 21 will not partake in the illegal consumption of alcohol. Any student who chooses to consume alcoholic beverages will not be under the influence of alcohol during any academic or clinical education experience.

**Healthcare Professions Licensure Requirements**

Students in the EMS Program shall be familiar with applicable legal and ethical requirements set forth in North Carolina state licensure laws and regulations pertaining to healthcare professions and occupations. North Carolina healthcare professions and occupations licensing boards may initiate an investigation upon receipt of information about any practice that may violate any provision of the licensing statute or any rule or regulation of the board. Boards generally have the power to: (i) refuse to issue a license; (ii) refuse to issue a certificate of renewal of a license; (iii) revoke or suspend a license; and (iv) invoke other such disciplinary measures, censure, or probative terms against a licensee if the board finds that an applicant or licensee:

- has given false information or has withheld material information from the board;
- in procuring or attempting to procure a license;
- has been convicted of or pleaded guilty or nolo contendere (“I do not wish to contend”) to any crime which indicates that the applicant/licensee is unfit or incompetent to practice his/her occupation or that the applicant/licensee has deceived or defrauded the public;
- has a mental or physical disability or uses any drug to a degree that interferes with his/her fitness to practice his/her occupation;
- engages in conduct that endangers the public health;
- is unfit or incompetent to practice his/her occupation by reason of deliberate or negligent acts or omissions regardless of whether actual injury to the patient is established; or
- engages in conduct that deceives, defrauds, or harms the public in the course of professional activities or services.

**Definitions**

“Drug testing” means the scientific analysis of urine, blood, breath, saliva, hair, tissue, and other specimens of the human body for the purpose of detecting a drug or alcohol. “Pre-placement testing” means drug testing conducted on all students prior to engaging in a clinical experience and/or providing direct patient care at an affiliated clinical agency if the agency requests such testing. “Reasonable suspicion testing” means drug testing conducted on a student because individualized and objective evidence exists to support the conclusion that a student (1) has engaged in the use of alcohol and/or illegal drugs in violation of applicable policies, laws, and regulations; or (2) appears to be impaired. Facts that could give rise to reasonable suspicion include, without limitation: observed possession or use of illegal drugs or alcohol; the odor of alcohol or drugs; impaired behavior such as slurred speech; decreased motor coordination; difficulty in maintaining balance; marked changes in personality or academic performance or behavior; reports of observed drug or alcohol use; an arrest or conviction for a drug or alcohol related offense; positive pre-placement or other drug tests; or newly discovered evidence of drug test tampering.

“Illegal drug” for purposes of this policy means (a) any drug which is not legally obtainable; (b) any drug which is legally obtainable but has not been legally obtained; (c) any prescribed drug not being used for the prescribed purpose, in the prescribed dosage and manner, or by the person for whom it was prescribed; (d) any over-the-counter drug being used at a dosage other than the recommended dosage, or being used for a purpose other than the purpose intended by the manufacturer; and (e) any drug being used in a manner that is not consistent with established medical practice standards. Examples of illegal drugs include, without limitation, stimulants, depressants, narcotics, analgesics, hallucinogenics, and cannabis substances such as marijuana and hashish.

“Impaired” means that a person’s mental or physical capabilities are reduced below their normal levels (with or without any reasonable accommodation for disability). An impaired student, by virtue of his/her use of alcohol or illegal drugs, exhibits deteriorated motor/psychomotor function, reduced conceptual/integrative/synthetic thought processes, and/or diminished judgment and attentiveness compared with previous observations of the student’s conduct and performance. For purposes of this policy, the term impaired shall also mean addiction and/or physical or mental dependence upon alcohol or illegal drugs.
Procedural Requirements

A. Prohibited Conduct and Duty to Notify of Charges/Convictions

1. Under no circumstance should a student participate in Program courses or clinical experiences while he/she is impaired.
2. Under no circumstance should a student manufacture, use, possess, sell or distribute illegal drugs in violation of applicable federal and state laws and/or applicable college policies, including the MTCC Code of Student Conduct.
3. Under no circumstance should a student purchase, consume or possess alcohol in violation of applicable state laws and/or applicable Program and college policies of MTCC Code of Student Conduct.
4. A violation by any student of applicable federal or state laws or regulations pertaining to the manufacture, use, possession, sale or distribution of an illegal drug, or a violation by any student of applicable state laws pertaining to the purchase, consumption or possession of alcoholic beverages is strictly prohibited. Students have an affirmative duty under this policy to report any criminal charges, convictions or plea agreements that are related to the manufacture, use, possession, sale or distribution of an illegal drug, or the purchase, consumption or possession of an alcoholic beverage. Such violations, if substantiated, will result in disciplinary action, up to and including dismissal from the Program.
5. A student who violates any provision of this Section will be deemed to be unable to meet the essential functions and technical standards of the Program and will be subject to disciplinary action, up to and including dismissal from the Program.

B. Agreement to Submit to Drug and Alcohol Testing

1. A student participating in a Program must agree to submit to pre-placement testing and reasonable suspicion testing when circumstances warrant such testing. The student shall sign an acknowledgment and consent form that evidences the student’s consent to: (a) comply with the College and Program policies pertaining to alcohol and illegal drugs; (b) comply with all policies and regulations of affiliated clinical agencies pertaining to alcohol and illegal drugs; (c) submit to pre-placement testing, reasonable suspicion drug testing under this policy, and in the event an affiliated clinical agency requires random drug testing pursuant to its policies, to submit to random drug testing; and (d) authorize the disclosure of drug testing results to the Program Director. Refusal to sign the acknowledgment and consent form shall be grounds for non-placement in clinical experiences and subsequent dismissal from the Program.

C. Pre-Placement Drug and Alcohol Testing

1. Pre-placement drug testing will be coordinated through the Program director or designee, and will be conducted by a qualified vendor. The cost of drug testing shall be borne by the student. The student shall be provided with a list of drugs for testing as may be required by either the Program or an affiliated clinical agency.
2. Positive pre-placement drug tests will be confirmed by additional tests.
3. The Program Director will notify a student of a confirmed positive drug test.
4. A student having a confirmed positive drug test will be subject to disciplinary action, up to and including dismissal from the Program Positive drug tests will also be referred to the Continuing Education Director for investigation and college discipline.
5. A student’s failure to submit to pre-placement drug testing, or any attempt to tamper with, contaminate or switch a sample will result in disciplinary action, up to and including dismissal from the Program.

D. Reasonable Suspicion Drug and Alcohol Testing

1. Reasonable suspicion drug testing may be conducted when individualized and objective evidence exists to support the conclusion that a student (1) has engaged in the use of alcohol and/or illegal drugs in violation of applicable policies, laws, and regulations; or (2) appears to be impaired.
2. Evidence of a student’s use of alcohol and/or illegal drugs or impairment may be provided by any individual, including employees of affiliated clinical agencies. Reasonable suspicion drug testing will be coordinated through the office of the Program Director, and the determination of whether
drug testing is warranted under the facts and circumstances shall be made by the Program Director and Continuing Education Director. The cost of drug testing shall be borne by the student. The student shall be provided with a list of drugs for testing as may be required by either the Program or an affiliated clinical agency.

3. Positive reasonable suspicion drug tests will be confirmed by additional tests.
4. The Program Director will notify a student of a confirmed positive drug test.
5. A student having a confirmed positive drug test will be subject to disciplinary action, up to and including dismissal from the Program. Positive drug tests will also be referred to the Continuing Education Director for investigation and college discipline.
6. A student’s failure to submit to reasonable suspicion drug testing, or any attempt to tamper with, contaminate or switch a sample will result in disciplinary action, up to and including dismissal from the Program.

VI. Confidentiality
All drug testing results shall be used, maintained, and disclosed by the College only as permitted by and in strict compliance with all applicable federal and state laws and regulations pertaining to confidential and protected health information and student records.

VII. Appeals
A student may avail himself/herself of any grievance and appeal procedures relating to any Program action taken under this policy.

Readmission to the EMS Program
Any student who is dismissed or withdraws from the EMS Program must submit an application for readmission. Readmission to the EMS Program is competitive and depends on the applicant’s qualifications. Prior admission to the EMS Program does not guarantee or give priority for readmission. The EMS Program may specify probationary conditions for readmitted students.

EMS PROGRAM COURSE POLICIES

Credit by Examination
No prior credit will be offered for prior education as this is a continuing education program and course sequencing may be different than prior studies.
No credit for Experiential Learning will be offered for the paramedic program.
No Advanced Placement will be offered. All students shall begin the program at the start of the program. The program will begin where the EMT class ends and continue through the full Paramedic Education.

Academic Dishonesty
Honesty and integrity are fundamental values for the EMS Program and the college. Students will not lie, steal, or cheat in their academic endeavors, nor will the student tolerate the actions of those who do. It is the students’ responsibility to be aware of the consequences of violating academic honesty policies and the impact such violations can have on his/her standing in the EMS Program, the college, and in his/her career.

To maintain the public’s trust in paramedics, dishonesty will not be tolerated. Acts of academic dishonesty may result in penalties ranging from a grade of zero on the paper/project/test to failure of the entire course and dismissal from the EMS Program. Circumstances of the act of academic dishonesty and consequent penalties will be documented in the student’s academic file and reported to the Director of Continuing Education. Students may appeal the program director’s decision through the college appeals process.

MTCC, as a community of scholarship, is also a community of honor. Faculty, staff, administrators, and students work together to achieve the highest standards of honesty and integrity. Academic dishonesty is a serious offense at MTCC because it threatens the quality of scholarship and defrauds those who depend on knowledge and integrity. Academic dishonesty includes:

a. Cheating—Intentionally using or attempting to use unauthorized materials, information, or study aids in any academic exercise.
b. **Fabrication**—Intentional falsification of information or citation in an academic exercise.

c. **Plagiarism**—Intentionally or knowingly representing the words or ideas of someone else as one's own in an academic exercise.

d. **Facilitation of Academic Dishonesty**—Intentionally or knowingly helping or attempting to help someone else to commit an act of academic dishonesty, such as knowingly allowing another to copy information during an examination or other academic exercise.

Academic dishonesty includes falsification of clinical documentation in any form (procedures performed, time in, time out, etc.). This behavior will not be tolerated. Any student found falsifying clinical documentation will receive a grade of "0" (unacceptable clinical work). This may occur at any time during the semester, even during the course withdrawal period. Subsequently, the student may also be dismissed from the EMS Program.

In the event of any potential violation of Academic Dishonesty Policy, the student and incident will be reported to the Director of Continuing Education. In addition, if necessary the student and incident will be reported to the North Carolina Office of Emergency Medical Services, and the National Registry of Emergency Medical Technicians.

**Attendance Policy**

Students are expected to attend all scheduled learning activities, such as orientations, lectures, seminars, labs, clinical and field rotations, evaluations, guest lectures, conferences, etc. No other activities are to be planned that conflict with learning activities. Students are responsible for resolving any conflicts that may arise. Students who are late or who miss a scheduled event face disciplinary action, including, but not limited to, potential penalties to the students’ final clinical course grade. Students are accountable for all course content and achievement of all learning objectives, so that all students receive comparable levels of instruction.

**Tardiness:**

Students are expected to attend all scheduled learning activities on time. Every effort should be made to notify the appropriate faculty member when unavoidable circumstances will cause lateness. Since late arrival is disruptive to a class/clinical setting, the faculty member has the option to exclude the student from the learning activity. Exclusion from a class/clinical learning activity due to tardiness results in absence and will be treated as such. Three tardies is equivalent to an absence.

**Absence:**

When absence from a scheduled learning activity cannot be avoided, the student must notify the appropriate faculty member. **Notification of faculty prior to the absence is expected**, but when that is not possible, notification should be carried out as soon after the absence as possible. Absences from any scheduled learning activity may delay the student’s progress in the EMS Program. If any scheduled learning activities are missed, the student will need to make up these learning activities or withdraw from the course. The decision regarding making up learning activities or consequent withdrawal from the course will reside with the instructor. **All absences from assigned clinical or field rotations require a conference with the Clinical Coordinator to arrange for rescheduling. The absence will be documented in the student file. A pattern of absences may result in a penalty and an unsatisfactory grade for the course.**

A student who has been subpoenaed for court purposes shall be permitted to attend each function. A copy of the subpoena shall be placed in the students file and the student shall be required to make up the time of instruction.

**Examinations:**

Students are expected to complete examinations on the scheduled dates. If a student is unable to complete a scheduled exam, for whatever reason, he or she must notify the instructor of the anticipated absence **prior to the exam**. Failure to notify the instructor will result in a **grade of zero** for that exam. Patterns of missed exams will be evaluated by EMS Program faculty.

The student must make arrangements to make up the exam when he or she notifies the instructor that the exam cannot be completed as scheduled. Class time will not be used for make-up exams. At the discretion of the instructor, the exam generally must be made up within **one week** of the original scheduled exam time. Failure to make up the exam at the rescheduled time will result in the **grade of zero** for the exam. The format of the make-up exam is at the discretion of the instructor. The allocated time period for an exam will not be extended for a student who is late.
Disruption of Learning Environments

Children:
Due to safety factors, students’ children are not allowed in lab, clinical, or field settings. Due to disruption of group
process, children are not allowed in lectures. Children may not be left in college buildings without direct adult
supervision.

Pagers/Cell Phones/Calculators/Laptop Computers
Pagers, cell phones, IPOD’s, PDA’s, etc. are not allowed during class time. Students must turn them off and have
them stored at all times while in class. Laptop computers may be used to take class notes if the instructor permits.
Students may use a non-programmable calculator.

Classroom Behavior:
Instructors have the responsibility to set and maintain standards of classroom behavior appropriate to the discipline
and method of teaching. Students may not engage in any activity which the instructor deems disruptive or
counterproductive to the goals of the class. Disruptive behavior during classroom, laboratory, clinical, and field
settings will not be tolerated. Disruptive behavior includes, but is not limited to, talking while the instructor is
talking, making inappropriate or excessive comments, sleeping, and distracting other students during the session.
Instructors have the right to remove offending students from class. The dismissal will result in an absence and will
be treated as such. Repetition of the offense may result in removal from the course and the EMS Program.

Textbooks and Supplemental Course Materials
Students are responsible for obtaining the required textbooks and supplemental course materials from the MTCC
Book Store and/or the appropriate sales agency.

Academic Action Appeal Policy
A student has the right to appeal a final assigned grade or dismissal from a program. A student may only appeal a
final grade or program dismissal if he/she can show the grade or Program dismissal was assigned arbitrarily or
impermissibly. A student who wishes to appeal a grade on a particular assignment or exam can do so if it affects
their final assigned grade or dismissal from a program.

A final grade or Program dismissal is deemed to have been assigned arbitrarily or impermissibly if, by a
preponderance of the evidence, a student establishes that:

1. The final grade or dismissal was impermissible based in whole or in part upon the student’s race, color, religion,
national origin, age, sex, disability, sexual orientation, or for some other arbitrary or personal reason unrelated to the
instructor’s reasonable exercise of his or her professional academic judgment in the evaluation of the academic
performance of the student; or

2. The final grade or Program dismissal was assigned in a manner not consistent with the standards and procedures
for evaluation established by the instructor, the program, the college, in the course syllabus, or during the
class/Program in written or oral communications directed to the class/Program as a whole; or

3. The final grade or Program dismissal was the result of a clear and material mistake in calculating or recording
grades or other evaluation.

4. Individual elements (e.g., assignments, tests, activities, projects) which contribute to a final grade are generally
NOT subject to appeal or subsequent review during a final grade appeals procedure. However, individual elements
may be appealed under these procedures providing all of the following conditions are met:
   a) The student presents compelling evidence that one or more individual elements were graded on arbitrary
      or impermissible grounds;
   b) Grounds can be established for determining a professionally sound grade for the appealed
      element(s); and
   c) The ensuing grade for each appealed element would have resulted in a different course grade than that
      assigned by the faculty member.
If a student is appealing dismissal from the Program, or a final assigned grade that results in dismissal, the student shall be allowed to continue taking courses until the appeal is resolved (with the approval of the Program instructor in which the classes are taken), with the exception of clinical placements or internships, or when the students’ continued participation is deemed by the EMS Program Director, Medical Director or Director of Continuing Education to be harmful or disruptive to other students and/or the program. If the appeal is unsuccessful and the dismissal stands, the student will be removed from any classes in which he or she is registered and will be responsible for any tuition and fees accrued as a result of registration during the appeals process.

Academic Action Appeal Procedure Overview
Students who wish to appeal a final assigned grade or dismissal from an academic program for any reason other than academic dishonesty should follow, in order, the academic appeal procedure outlined below. Appeals of a final assigned grade and appeals of dismissals from an academic program follow similar procedures:

1) Appeal to Instructor;
2) Program Director;
2) Appeal to Director of Continuing Education;
3) Appeal to Continuing Education Dean

CAREER PLANNING

Letters of Reference
Letters of reference are ordinarily required for job applications. Although not obligated to do so, faculty are pleased to complete references on request. Students are asked to seek references only for serious employment considerations and/or to develop a file. References cannot be sent or completed without the student's or graduate's written consent. The individual who wants a reference letter must first provide a signed consent for release of information. It is a courtesy to request a faculty member to complete a reference before submitting that person’s name, and to allow ample time for the request to be completed.

Student Professional Portfolio
Students enrolled in EMS Program are required to complete a Student Professional Portfolio. The Portfolio makes up five (5) percentage points toward the student’s final grade in each course. The goal of this portfolio is to prepare students for seeking and achieving employment in the EMS profession.

The Portfolio will include the student’s:
- resume
- cover letter for achieving prehospital employment
- curriculum vitae
- academic achievements
- professional achievements
- personal achievements
- listing of service activities
- letters of commendation
- other appropriate documentation

The portfolio will be updated during each clinical semester, adding to and building the Portfolio as the student progresses through the EMS Program. Examples of certain documents will be provided and feedback will be given to the student.

The Portfolio will be placed in a three-ring binder for submission. Each section should be separated and labeled.

Student Activities

Emergency Medicine Today
Attendance at the Emergency Medicine Today Conference in Greensboro is recommended for all paramedic students. The Conference provides both learning and networking opportunities. Registration and dues will be incurred by the student. Depending on the classes taken and duration in classes a student may be awarded clinical rotation time.
Activities for Elected Representatives

EMS Advisory Board
The EMS Advisory Board meets annually and offers advice to the EMS Program. Membership includes representatives from the EMS community: hospital administration, EMS agencies, faculty, adjunct faculty, clinical preceptors, EMS educators, and a student representative from the campus EMS Program, Law enforcement community, and others as deemed necessary.

Pinning Ceremony and Commencement

Pinning Ceremony
A pinning ceremony is held to recognize students who have completed the EMS program during the preceding academic year. It provides an opportunity for students to reflect upon their educational experience, celebrate their graduation, and recognize the contributions of others in helping them achieve their EMS educational goals.

Responsibilities of all students/graduates include participating in decision-making, getting a picture taken for the class photograph, ordering class pins, invitations, slide presentation, etc.

ALUMNI
To maintain up-to-date records of alumni, graduates are asked to keep the EMS Program and the College informed of current addresses and employment. Graduates are encouraged also to recruit qualified students into the Emergency Medical Program and to support the Program’s current students and special projects.
I, ________________________________, the undersigned student, enrolled in the MTCC EMS PROGRAM, hereby understand and agree to the following conditions, including during my clinical education at assigned FACILITIES:

I understand my participation in this program in which I will receive structured clinical experience is contingent upon my satisfactory performance and cooperation with the FACILITY staff, and if at any time I do not abide by the below conditions, I understand that I may be removed from the Program.

I understand my clinical performance as it relates to Program objectives will be evaluated on a regular basis by designated faculty and/or FACILITY representatives and that I may be dismissed if my performance is not satisfactory.

I understand that the records and documents of the FACILITY are legally confidential, and I will not divulge any personal and/or medical and/or business information concerning any person and/or record which I encounter at any FACILITY.

I understand that during my participation in the clinical experience I am not an employee of MTCC and am not entitled to any of the benefits of employment such as worker's compensation coverage, wages, or medical insurance. I understand that I also am not an employee of the FACILITY and am not entitled to any employment benefits during my participation in this Program.

I understand that I am responsible for my transportation to and from the FACILITY and to any clinical assignment.

I understand that I am responsible for expenses related to my own illness.

I have reviewed a copy of the Exposure Control Plan which outlines the Program's requirements regarding vaccinations, precautions, and education concerning blood-borne pathogens, and my responsibilities and options should an exposure occur.

I am in compliance with North Carolina General Statute 130A-155.1 and North Carolina Immunization Rules and have provided the college with evidence of the following current immunizations: (a) diphtheria-pertussis-tetanus or tetanus-diphtheria, (b) measles (rubella), mumps, and rubella (MMR is the preferred vaccine), (c) chicken pox (varicella), and (d) a tuberculin skin test (PPD) or a chest X-ray if the skin test is positive. This list is subject to change depending on the clinical site requirements.

I understand that I am responsible for following the administrative policies of the FACILITY, and for completing and providing a record of mental and physical health, immunizations, current CPR certification, and other informational forms (using Departmental forms) requested by the FACILITY or the EMS Faculty.

I will submit to any additional laboratory tests required by clinical agencies with which the college has an educational affiliation agreement. I will follow the recommendations of a qualified health care provider for corrective measures in instances of a known health problem.

I understand that I am responsible for adhering to the dress code of the Program and FACILITY and for any necessary expense in attaining and maintaining appropriate uniforms.

I understand that I am responsible for reporting to the designated individual (faculty or FACILITY liaison) at the FACILITY on time during my scheduled assignment, and that I must notify the designated individual of any deviation from my scheduled arrival/departure times.
I understand that I am required to adhere to the policies and procedures delineated in the EMS Program Student Handbook.

I agree to verbally report promptly to my clinical faculty instructor any incident of which I have actual knowledge which might involve legal liability on the part of myself, a classmate, or licensed nursing personnel. I agree to report promptly in writing to the EMS Program Director any incident of which I have actual knowledge which might involve legal liability on the part of my supervising faculty instructor. Such report shall be filed within two days after the occurrence of such incident.

I pledge on my honor as a professional student in the EMS Program that I will comply fully with the academic honesty policy in the MTCC Student Handbook, which precludes:

1. Cheating—intentionally using or attempting to use unauthorized materials, information, or study aids in any academic exercise.
2. Fabrication—intentional falsification or invention of information or citation in any academic exercise.
3. Plagiarism—intentionally or knowingly representing the words or ideas of someone else as one’s own in any academic exercise.
4. Facilitation of academic dishonesty—intentionally or knowingly helping or tempting someone else to commit an act of academic dishonesty, such as knowingly allowing another to copy information during an examination or other academic exercise.

The EMS faculty has my permission to keep samples of my written work to use as exhibits for approval and accreditation processes.

I understand that EMS Program faculty will consult with each other regarding my clinical and academic performance.

**I acknowledge that I have received a copy of the student handbook and I understand the above conditions of acceptance and agree to perform accordingly.**

__________________________________________                      _________________
Student Signature                                       Date

A copy of this contract will be filed in the student's EMS Program academic folder after it is signed and dated.
McDowell Technical Community College  
Appendix A  
Physician’s Statement of Health Status for Paramedic Students

In addition to the health and immunization records required by North Carolina general Statute 130A-155.1, each student must have a physical examination by a licensed physician, physician’s assistant, or advanced nurse practitioner verifying satisfactory health status.

Paramedic students shall be in good general health and free from any health impairment which is a potential risk to a patient or which might interfere with the performance of his/her duties as a student and/or paramedic intern. Students must also be free of any mental or physical condition which would interfere with the ability to satisfy the requirements of a paramedic intern or potentially risk the health or safety of patients, clinical instructors, or other health care professionals.

A Functional Job Analysis for the EMT-Paramedic is attached to assist the health professional in determining the mental and physical fitness of the student to participate in the Emergency Medical Program.

Student Name ______________________________________

Student Date of Birth ________________________________

Based on my assessment of this student’s physical and emotional health, he/she appears able to participate in the activities of a paramedic student in a clinical setting.

_________________________________________________  ________________
Signature of Physician/Physician Assistant/Nurse Practitioner                              Date

__________________________________________________
Print name of Physician/Physician Assistant/Nurse Practitioner                      Phone number

__________________________________________________
Office Address
Paramedic Functional Job Analysis

Paramedic Characteristics
The Paramedic must be a confident leader who can accept the challenge and high degree of responsibility entailed in the position. The Paramedic must have excellent judgement and be able to prioritize decisions and act quickly in the best interest of the patient, must be self-disciplined, able to develop patient rapport, interview hostile patients, maintain safe distance, and recognize and utilize communication unique to diverse multicultural groups and ages within those groups. The paramedic must be able to function independently at optimum level in a non-structured environment that is constantly changing.

Even though the Paramedic is generally part of a two-person team generally working with a lower skill and knowledge level Basic EMT, it is the Paramedic who is held responsible for safe and therapeutic administration of drugs including narcotics. Therefore, the Paramedic must not only be knowledgeable about medications but must be able to apply this knowledge in a practical sense. Knowledge and practical application of medications include thoroughly knowing and understanding the general properties of all types of drugs including analgesics, anesthetics, anti-anxiety drugs, sedatives and hypnottics, anti-convulsants, central nervous stimulants, psychotherapeutics which include antidepressants, and other anti-psychotics, anticholergicns, cholerergics, muscle relaxants, anti-dysrhythmics, anti-hypertensives, anticoagulants, diuretics, bronchodilators, ophthalmics, pituitary drugs, gastro-intestinal drugs, hormones, antibiotics, antifungals, antiinflammatories, serums, vaccines, anti-parasitics, and others.

The Paramedic is personally responsible, legally, ethically, and morally for each drug administered, for using correct precautions and techniques, observing and documenting the effects of the drugs administered, keeping one's own pharmacological knowledge-base current as to changes and trends in administration and use, keeping abreast of all contraindications to administration of specific drugs to patients based on their constitutional make-up, and using drug reference literature.

The responsibility of the Paramedic includes obtaining a comprehensive drug history from the patient that includes names of drugs, strength, daily usage and dosage. The Paramedic must take into consideration that many factors, in relation to the history given, can affect the type medication to be given. For example, some patients may be taking several medications prescribed by several different doctors and some may lose track of what they have or have not taken. Some may be using non-prescription/over the counter drugs. Awareness of drug reactions and the synergistic effects of drugs combined with other medicines and in some instances, food, are imperative. The Paramedic must also take into consideration the possible risks of medication administered to a pregnant mother and the fetus, keeping in mind those drugs may cross the placenta.

The Paramedic must be cognizant of the impact of medications on pediatric patients based on size and weight, special concerns related to newborns, geriatric patients and the physiological effects of aging such as the way skin can tear in the geriatric population with relatively little to no pressure. There must be an awareness of the high abuse potential of controlled substances and the potential for addiction, therefore, the Paramedic must be thorough in report writing and able to justify why a particular narcotic was used and why a particular amount was given. The ability to measure and re-measure drip rates for controlled substances/medications are essential. Once medication is stopped or not used, the Paramedic must send back unused portions to proper inventory arena.

The Paramedic must be able to apply basic principles of mathematics to the calculation of problems associated with medication dosages, perform conversion problems, and differentiate temperature reading
between centigrade and Fahrenheit scales, be able to use proper advanced life support equipment and supplies (i.e. proper size of intravenous needles) based on patient’s age and condition of veins, and be able to locate sites for obtaining blood samples and perform this task, administer medication intravenously, administer medications by gastric tube, administer oral medications, administer rectal medications, and comply with universal pre-cautions and body substance isolation, disposing of contaminated items and equipment properly.

The Paramedic must be able to apply knowledge and skills to assist overdosed patients to overcome trauma through antidotes, and have knowledge of poisons and be able to administer treatment. The Paramedic must be knowledgeable as to the stages drugs/medications go through once they have entered the patient’s system and be cognizant that route of administration is critical in relation to patient’s needs and the effect that occurs.

The Paramedic must also be capable of providing advanced life support emergency medical services to patients including conducting of and interpreting electrocardiograms (EKGs), electrical interventions to support the cardiac functions, performing advanced endotracheal intubations in airway management and relief of pneumothorax and administering of appropriate intravenous fluids and drugs under direction of off-site designated physician.

The Paramedic is a person who must not only remain calm while working in difficult and stressful circumstances, but must be capable of staying focused while assuming the leadership role inherent in carrying out the functions of the position. Good judgement along with advanced knowledge and technical skills are essential in directing other team members to assist as needed. The Paramedic must be able to provide top quality care, concurrently handle high levels of stress, and be willing to take on the personal responsibility required of the position. This includes not only all legal ramifications for precise documentation, but also the responsibility for using the knowledge and skills acquired in real life threatening emergency situations.

The Paramedic must be able to deal with adverse and often dangerous situations which include responding to calls in districts known to have high crime and mortality rates. Self-confidence is critical, as is a desire to work with people, solid emotional stability, a tolerance for high stress, and the ability to meet the physical, intellectual, and cognitive requirements demanded by this position.

Physical Demands
Aptitudes required for work of this nature are good physical stamina, endurance, and body condition that would not be adversely affected by frequently having to walk, stand, lift, carry, and balance at times, in excess of 125 pounds. Motor coordination is necessary because over uneven terrain, the patient’s, the Paramedic’s, and other worker’s well-being must not be jeopardized.

Comments
The Paramedic provides the most extensive pre-hospital care and may work for fire departments, government agencies, private ambulance services, police departments or hospitals. Response times for nature of work are dependent upon nature of call. For example, a Paramedic working for a private ambulance service that transports the elderly from nursing homes to routine medical appointments and check-ups may endure somewhat less stressful circumstances than the Paramedic who works primarily with 911 calls in districts known to have high crime rates. Thus, the particular stresses inherent in the role of the Paramedic can vary, depending on place and type of employment.

However, in general, in the analyst’s opinion, the Paramedic must be flexible to meet the demands of the ever-changing emergency scene. When emergencies exist, the situation can be complex and care of the patient must be started immediately. In essence, the Paramedic in the EMS system uses advanced training and equipment to extend emergency physician services to the ambulance. The Paramedic must be able to make accurate independent judgements while following oral directives. The ability to perform duties in a timely manner is essential, as it could mean the difference between
life and death for the patient. Use of the telephone, electronic device or radio dispatch for coordination of prompt emergency services is required, as is a pager, depending on place of employment. Accurately discerning street names through map reading, and correctly distinguishing house numbers or business addresses are essential to task completion in the most expedient manner. Concisely and accurately describing orally to dispatcher and other concerned staff, one's impression of patient's condition, is critical as the Paramedic works in emergency conditions where there may not be time for deliberation. The Paramedic must also be able to accurately report orally and in writing, all relevant patient data. At times, reporting may require a detailed narrative on extenuating circumstances or conditions that go beyond what is required on a prescribed form. In some instances, the Paramedic must enter data on computer from a laptop in ambulance. Verbal skills and reasoning skills are used extensively.
Professional status as an Emergency Medical Technician and Emergency Medical Technician-Paramedic is maintained and enriched by the willingness of the individual practitioner to accept and fulfill obligations to society, other medical professionals, and the profession of Emergency Medical Technician. As an Emergency Medical Technician-Paramedic, I solemnly pledge myself to the following code of professional ethics:

A fundamental responsibility of the Emergency Medical Technician is to conserve life, to alleviate suffering, to promote health, to do no harm, and to encourage the quality and equal availability of emergency medical care.

The Emergency Medical Technician provides services based on human need, with respect for human dignity, unrestricted by consideration of nationality, race creed, color, or status.

The Emergency Medical Technician does not use professional knowledge and skills in any enterprise detrimental to the public wellbeing.

The Emergency Medical Technician respects and holds in confidence all information of a confidential nature obtained in the course of professional work unless required by law to divulge such information.

The Emergency Medical Technician, as a citizen, understands and upholds the law and performs the duties of citizenship; as a professional, the Emergency Medical Technician has the never-ending responsibility to work with concerned citizens and other health care professionals in promoting a high standard of emergency medical care to all people.

The Emergency Medical Technician shall maintain professional competence and demonstrate concern for the competence of other members of the Emergency Medical Services health care team.

An Emergency Medical Technician assumes responsibility in defining and upholding standards of professional practice and education.

The Emergency Medical Technician assumes responsibility for individual professional actions and judgment, both in dependent and independent emergency functions, and knows and upholds the laws which affect the practice of the Emergency Medical Technician.

An Emergency Medical Technician has the responsibility to be aware of and participate in matters of legislation affecting the Emergency Medical Service System.

The Emergency Medical Technician, or groups of Emergency Medical Technicians, who advertise professional service, do so in conformity with the dignity of the profession.

The Emergency Medical Technician has an obligation to protect the public by not delegating to a person less qualified, any service which requires the professional competence of an Emergency Medical Technician.

The Emergency Medical Technician will work harmoniously with and sustain confidence in Emergency Medical Technician associates, the nurses, the physicians, and other members of the Emergency Medical Services health care team.

The Emergency Medical Technician refuses to participate in unethical procedures, and assumes the responsibility to expose incompetence or unethical conduct of others to the appropriate authority in a proper and professional manner.

Through my association within any of the clinical or field sites during the time spent as a student in the EMS Program, I understand that patient information in any form (paper, electronic, oral, etc.) is protected by law. I also understand that any breach of patient confidentiality can have severe ramifications up to and including termination of my relationship with said clinical or field site as well as possible civil and criminal penalties. In addition, I may be dismissed from the EMS Program. I will only access, use or disclose the minimum amount of patient information that I am authorized to access, use or disclose and that is necessary to carry out my assigned duties. I will not improperly divulge any information that comes to me through the carrying out of my assigned duties, program assignment or observation.

This includes but is not limited to:

- I will not discuss information pertaining to any patient with anyone (even my own family) who is not directly working with said patient.
- I will not discuss any patient information in any place where it can be overheard by anyone who is not authorized to have this information.
- I will not mention any patient’s name or disclose directly or indirectly that any person is a patient except to those authorized to have the information.
- I will not describe any behavior, which I have observed or learned about through association within said clinical sites except to those authorized to have this information.
- I will not contact any individual or agency outside said clinical site to get personal information about an individual patient unless a release of information is signed by the patient or by someone who has been legally authorized by the patient to release information.
- I will not use confidential clinical site business related information in any manner not required by my job or disclose it to anyone not authorized to have or know it.
- I will not access information concerning any patient in whose care I am not directly involved other than as established by my job description.
- I understand my responsibility to take action when faced with a privacy concern or become aware of a potential violation of our policies and standards. This includes:
  - RECOGNIZE the concern and nature of the situation
  - RESPOND appropriately
  - REPORT the issue to someone who can assist in resolving the matter

I understand that my agreement to maintain the confidentiality of patient information is a condition of my continued placement in said clinical sites. I understand that failure to maintain confidentiality is basis for disciplinary action, including dismissal from the EMS Program. With my signature, I indicate I have read and understand this Agreement.

Printed Name: ________________________________________________

Signature: ____________________________________________________

Date: _____________________
In compliance with the Family Education Rights and Privacy Act, I ____________________________,
being 18 years of age or over hereby authorize McDowell Technical Community College
Emergency Medical Program, to release my transcript, grades, pre-college test scores, academic EMS Program
records, and any EMS Program disciplinary information and actions to the North Carolina Office of EMS and the
National Registry of Emergency Medical Technicians as needed.

Signature: _______________________________  Date______________________
I, __________________________ understand that in the process of learning ALS skills required of paramedics, that certain invasive interventions must be practiced and mastered. To that end, I understand that there will be practical labs in which I will perform peripheral venous access using an IV catheter on manikins, one or more of my classmates, and that one or more fellow students will perform peripheral venous access on me. All venous access attempts will be accomplished under the direct supervision of a qualified preceptor and students will use new, sterile equipment and aseptic technique, thus minimizing the risk of complications.

Further, there will be labs in which I will perform intramuscular (IM) injections on one or more of my classmates, and that one or more of my fellow students will perform IM injections on me under the direct supervision of a qualified preceptor. Students will use sterile equipment and aseptic technique.

Further, there will be labs in which I will perform blood glucose monitoring on one or more of my classmates requiring the use of a lancet to draw a drop of blood, and that one or more of my fellow students will perform blood glucose monitoring on me using sterile technique.

I understand that a physician, nurse or EMT-Paramedic preceptor will supervise each skill with sufficient ability that they would be considered competent to both perform the skill and teach it to others.

I further understand that mastery of each of these skills is a requirement for EMT-P course completion and consent to participating in these labs as specified above.

__________________________________________
Student signature

__________________________________________
Date
I, ____________________________________ give MTCC’s Emergency Medical Program permission to use my name and/or likeness in advertising and marketing for the Program. Advertising areas can include photographs, websites, brochures, videos, and other marketing tools. I understand that I will receive no compensation for such use.

________________________________________  ______________________________
Student signature                      Date
A WORD ABOUT A POSITIVE OUTLOOK

Do you realize how much effect one positive or negative thought can have on your life?

Be careful of your thoughts,
    They become your words,
Be careful of your words,
    They become your actions,
Be careful of your actions,
    They become your habits,
Be careful of your habits,
    They become your character,
Be careful of your character,

IT BECOMES YOUR DESTINY........

.....Author Unknown.....