

WEST HILLS COLLEGE LEMOORE
COURSE OUTLINE OF RECORD (COR)

FACULTY ORIGINATOR: Marleen Smart

DATE: 3/17/2012

NEW COURSE PROPOSAL COURSE REVISION

CHECKLIST: (check all that apply)

- Course Revision Form
- New Course Proposal
- Course Outline
- Learning Resources Statement
- Distance Education (DE) Addendum
- Adopted Textbook Form
- Form A Prerequisite
- Form B Prerequisite
- Form C Limitations on Enrollment

MIS DATA: (Administrative Use Only)

TOP Code: [Click here to enter text.](#)
Credit Status: [Choose an item.](#)
Basic Skills Status: [Choose an item.](#)
SAM Code: [Choose an item.](#)
Prior to College Level: [Choose an item.](#)
Noncredit Category:
Funding Agency Category:

ROUTING: (must be filled out prior to agenda submission)

Originating faculty: Marleen Smart Date: 3/17/2012

Comments: [Click here to enter text.](#)

Curriculum Representative: Leslie Catron Date: 4/23/2012

Comments: [Click here to enter text.](#)

Technical Review: Committee Date: 4/18/2012

Comments: [Click here to enter text.](#)

Chief Instructional Officer: [Click here to enter text.](#) Date: [Click here to enter a date.](#)

Comments: [Click here to enter text.](#)

COURSE REVISION (use for existing courses only)

RULE OF SEVEN – There are seven course characteristics which require approval of the West Hills College Lemoore Curriculum Committee if the course is common to both colleges. Check any of the following characteristics that are being changed:

- Course Number
- Course Title
- Course Prefix
- Units
- Transferability
- Prerequisite(s)
- Course Objectives

OTHER CHANGES – check all that apply

- | | |
|--|--|
| <input type="checkbox"/> Five Year Review | <input type="checkbox"/> Instructional Methodologies |
| <input type="checkbox"/> Grading Option | <input type="checkbox"/> Cultural Pluralism |
| <input type="checkbox"/> Advisory/Prerequisite/Corequisite | <input type="checkbox"/> Textbook |
| <input type="checkbox"/> Catalog Description | <input type="checkbox"/> Distance Education Addendum |
| <input type="checkbox"/> Course Objectives | <input type="checkbox"/> Critical Thinking Assignments |
| <input type="checkbox"/> Course Content | <input type="checkbox"/> Methods of Assessment |

LEARNING AREA APPROVAL

- Changes or revisions to the curriculum have been discussed with learning area faculty.
- Supporting evidence attached at the end of the document (i.e., emails with header information, learning area minutes with attendees, etc.)

NEW COURSE PROPOSAL (use for new courses only)

| | | |
|---|---|--|
| Total Units: 9 | Semester Lecture Hrs: | Semester Lab Hrs: 486 |
| Transferability (attach evidence): | <input checked="" type="checkbox"/> CSU | <input checked="" type="checkbox"/> UC |
| New Major? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| <i>If yes, state the new major:</i> | <i>EMT Paramedic</i> | |
| Intended for Transfer? | <input checked="" type="checkbox"/> Yes (complete next row) | <input type="checkbox"/> No |
| <input checked="" type="checkbox"/> Transfer Elective | <input type="checkbox"/> Transfer General Education | <input checked="" type="checkbox"/> Transfer Major Requirement |
| Associate Degree? | <input checked="" type="checkbox"/> Yes (complete next row) | <input type="checkbox"/> No |
| <input type="checkbox"/> AA/AS Elective | <input type="checkbox"/> AA/AS General Education | <input checked="" type="checkbox"/> AA/AS Major Requirement |
| Certificate Program? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| <i>If yes, state the certificate:</i> | <i>EMT Paramedic</i> | |

COURSE PREFIX and NUMBER: EMT 15
COURSE TITLE: Paramedic Field Experience
INSTRUCTIONAL AREA: HEALTH AND WELLNESS

Room Space Requirements: N/A
Staff Requirements: Certified paramedic preceptor in the field, and faculty to monitor hours and experience.
Equipment Requirements: N/A

COURSE OUTLINE (use for all courses)

UNITS: 9 Semester Lecture Hrs: Semester Lab Hrs: 486

Grading (check all that apply): minimum Pass/No Pass
pass 80%

Repeatable for Credit? Yes *Maximum number of times taken for credit: 1* No

Materials Fee: \$ *Material Description:*

1. Course/Catalog Description

This course is the final course in the paramedic program and occurs completely in the field under the direct supervision of a certified pre-arranged paramedic preceptor. It assists the student in developing and refining skills. A wide variety of client activities are taught, including: medical histories, physical examination, client management, triage, trauma care and supportive care of the sick or injured in a field setting. This course is part of a program of study to prepare paramedics as described in California Code of Regulations, Title 22, Division 9, Chapter 4 and lists the required hours and subjects to be covered as set forth by the Department of Transportation curriculum.

2. Prerequisites (List course prefix, number, and title) Not applicable

EMT 10 Paramedic I
EMT 11 Paramedic I Lab
EMT 51 Advanced Cardiac Life Support
EMT 12 Advanced Paramedic II
EMT 13 Advanced Paramedic II Lab
EMT 14 Acute Clinical Lab
Health screening
Live scan background clearance

3. Corequisites (List course prefix, number, and title) Not applicable

4. Advisories (List course prefix, number, and title) Not applicable

5. Enrollment Limitations (Describe health/safety, audition, tryout, or cohort limitation) Not applicable

Enrollment will be limited to 24 students.

6. Course Objectives (Number each objective; objectives must define the exit skills required of students; use measurable objectives only; courses that allow repeatability must specify objectives for each time the course can be repeated)

Upon completion of the course the student will be able to meet the following objectives:

1. Discuss the pathophysiology, assessment findings, need for rapid intervention and transport, and management of medical emergencies.
2. Discuss the causative agent, body systems affected and potential secondary complications, routes of transmission, susceptibility and resistance, signs and symptoms, client management and protective measures for medical emergencies.
3. List the psychosocial implications that medical emergencies can have on a client and discuss ways to assess and properly intervene to produce positive client outcomes.
4. Compare and contrast the pathophysiological, assessment, and management strategies of clients with gynecological emergencies.
5. Evaluate the epidemiology, preventive strategies, pathophysiology, assessment findings and management of emergent neurological problems.
6. Distinguish between the signs and symptoms of emergent and non-emergent gastroenterological problems.
7. Diagram the pathophysiological principles of an infectious process. Given several scenarios of clients with pulmonary problems, formulate a detailed assessment, systematic care, and appropriate transport.
8. Given several scenarios involving endocrine emergency clients, plan for the appropriate management and care of the client.
9. Given several scenarios of poisoning and overdose, evaluate the clients and provide appropriate assessments, treatment and transport.
10. Given several scenarios, evaluate the clients and provide appropriate assessments, treatment and transport of clients involved in environmental emergencies.

7. Course Content Lecture(Use outline format with letters for differentiating major topics and numbers for subtopics ; list major topics or lesson units; differentiate content of each level, when levels are assigned)

8. Course Content Lab (Use outline format with letters for differentiating major topics and numbers for subtopics ; for courses with lab hours only) Not applicable

- A. Field assessment of trauma, medical, obstetrical and pediatric clients
- B. Appropriate management of clients in the field.
 1. Airway adjuncts
 2. Cardiopulmonary resuscitation
 3. Cardioversion, defibrillation and pacing
 4. Spinal immobilization
 5. Bandaging, splinting, and traction
 6. Needle thorocostomy
 7. Childbirth
 8. Burns
 9. Shock recognition and management
- C. Documentation
- D. Leadership
- E. Teamwork

9. Methods of Instruction (Use outline format with letters for differentiating methods ; list instructor initiated teaching and learning strategies)

A. Observation

- B. Direct patient care
- C. Assessment
- D. Scenarios
- E. Simulation

10. Out-of- Class Assignments (Use outline format with letters for differentiating assignments; examples include, but are not limited to, mandatory field trips, applied field work, etc.) Not applicable

The course will occur entirely in the field.

11. Methods of Assessment (Use outline format with letters for differentiating major topics and numbers for subtopics ; list measurements of student achievement, writing assignment, and/or proficiency demonstration)

- 1. Competency skills testing
- 2. Direct observation
- 3. Preceptor evaluation

12. Cultural Pluralism Assignments and Methodology (Describe specific instructor initiated examples examining aspects of culture, contributions and social experiences of underrepresented ethnic or racial groups in the U.S. or in the history and multicultural traditions of non-western societies; examples should be comparative among multiple social groups, and include analysis of concepts of ethnicity, ethnocentrism and racism, and how they shape and explain ethnic experience)

Cultural diversity is a thread that runs throughout the program. Students will encounter patients based on their need which will include a variety of cultural, ethnic and socioeconomic backgrounds when requiring emergency medical care.

13. Critical Thinking Assignments (Use detail and state in cognitive terms reasonable, reflective thinking that focuses on observational skills, self-awareness, reasoning skills, questioning skills, problem-solving skills, and presenting one's position on an issue or solution)

Students will need to identify appropriate interventions that are required upon abnormal assessment findings. Students will have to learn to organize, delegate and prioritize care priorities and interventions when performing their patient care when in the field.

LEARNING RESOURCES STATEMENT (use for all courses)

The Learning Resources collection has been reviewed by the faculty originator and the librarian.

The following resources are ADA compliant and currently available for course support:

- Books
- Reference Materials
- Media
- Electronic Resources

The following resources are recommended for purchase to further support the course:

- Books
- Reference Materials
- Media
- Electronic Resources

Include an itemized list of materials requested including source, title, ISBN, and/or other purchase information:

[Click here to enter text.](#)

TEXTBOOK FORM (use for all courses)

All transfer-level courses are required 1) to have a primary text with a 12th grade or higher readability and 2) be no more than five years old. Exceptions will be subject to Curriculum Committee approval. Secondary textbooks and other instructional materials are not restricted to specific readability levels or publication dates. All textbooks must have readability statistics attached.

REQUIRED PRIMARY STUDENT TEXTBOOK(S) / MATERIAL(S)

Title: Emergency Care in the Streets

Edition, Publication Year: 7th, 2013

ISBN/Website: 978-1-4496-3780-4

Author(s) Last Name, First Name: Caroline, Nancy

Publisher: Jones and Bartlett Learning

Readability Level: 12.0

Readability Analysis:

Nancy Caroline's, Emergency Care in the Streets, 7th Ed.

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One aspect of negligence is whether there is "foreseeability." This concept implies that the injury, or harm, could have been predicted and therefore avoided if the proper precautions had been taken. For example, giving an incorrect dosage of a drug will foreseeable result in harm to a patient, just as running a red light while en route to a call may foreseeably result in a crash.

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In an adult, use of a straight blade requires great care; if used improperly and levered across the upper jaw, the straight blade is more likely to damage the patient's teeth. The curved laryngoscope blade is less likely to be levered against the teeth by an inexperienced paramedic. Figure 64. The direction of the curve conforms to that of the tongue and pharynx, so the blade follows the outline of the pharynx with relative ease. The tip of the curved blade is placed in the vallecula (the space between the epiglottis and the base of the tongue) rather than beneath the epiglottis; it indirectly lifts the epiglottis to expose the vocal cords. You should have curved and straight blades readily available during and orotracheal intubation attempt.

Orotracheal Intubation by Direct Laryngoscopy

Orotracheal intubation by direct laryngoscopy involves inserting an ET tube through the mouth and into the trachea while visualizing the glottis opening with a laryngoscope; it is the most common method of performing ET intubation in the emergency setting. The indications and contraindications for orotracheal intubation include the following:

Indications

- Airway control needed as a result of coma, respiratory arrest, and/or cardiac arrest
- Ventilatory support before impending respiratory failure
- Prolonged ventilator support required
- Absence of a gag reflex
- Traumatic brain injury
- Unresponsiveness

- Impending airway compromise (as in burns or trauma)
- Medication administration (as a last resort)

Contraindications

- An intact gag reflex
- Inability to open the patient's mouth because of traumatic dislocation of the jaw, or a pathological condition
- Inability to see the glottis opening
- Copious secretions, vomitus, or blood in the airways

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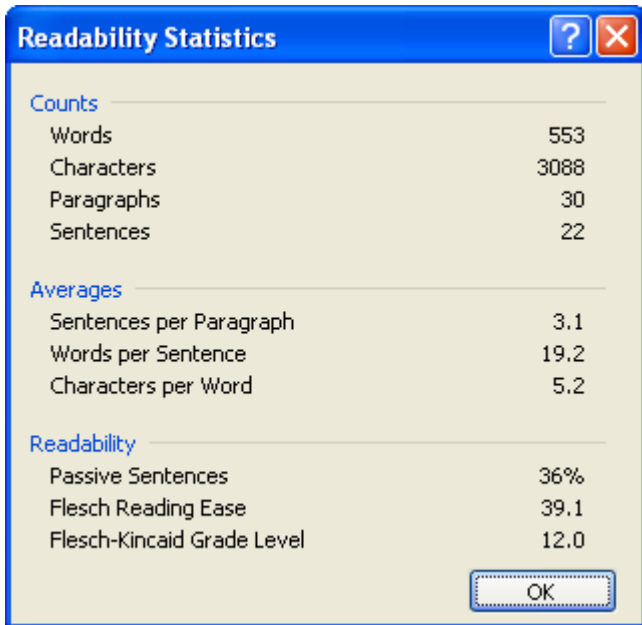
Endocrine disorders are caused by either hypersecretion or insufficient secretion of a gland. Hypersecretion presents as overactivity of the target organ regulated by the gland. Insufficient secretion results in underactivity of the organ controlled by the gland. Glucose metabolic derangements, or disorders, are caused by dysfunction of the pancreas, which impairs the body's ability to metabolize glucose.

The effects of a disturbance of the endocrine gland function are determined by the degree of dysfunction of the gland and by the age and sex of the patient. Pancreatic dysfunction may range from barely datable to extreme. Most glucose derangements and other clinically significant endocrine emergencies result in compromise of the ABCs, improper fluid balance, deteriorating mental status, and abnormal vital signs and blood glucose levels.

Diabetes Mellitus

Medically, the term diabetes refers to a metabolic disorder in which the body's ability to metabolize simple carbohydrates (glucose) is impaired. It is characterized by the following:

- -Polyphagia, an increased appetite caused by the inability of glucose to be transported across the cell membrane.
- -Polydipsia, a significant thirst caused by dehydration brought about by an increase in diuresis
- -Polyuria, the passage of large quantities of urine containing glucose. Excess glucose is excreted and attracts water, resulting in excessive diuresis.



The image shows a software dialog box titled "Readability Statistics". It contains three sections: "Counts", "Averages", and "Readability". Each section lists a metric and its corresponding value. At the bottom right, there is an "OK" button. The dialog box has a blue title bar with a question mark icon and a close button (X).

| Counts | |
|------------|------|
| Words | 553 |
| Characters | 3088 |
| Paragraphs | 30 |
| Sentences | 22 |

| Averages | |
|-------------------------|------|
| Sentences per Paragraph | 3.1 |
| Words per Sentence | 19.2 |
| Characters per Word | 5.2 |

| Readability | |
|----------------------------|------|
| Passive Sentences | 36% |
| Flesch Reading Ease | 39.1 |
| Flesch-Kincaid Grade Level | 12.0 |

OK

Course Outline of Record Approval

| Title | Signature | Date |
|---|------------------|-------------|
| Originating Faculty | _____ | _____ |
| Learning Area Curriculum Representative | _____ | _____ |
| WHCL Articulation Officer (transfer courses only) | _____ | _____ |
| WHCL Chief Instructional Officer | _____ | _____ |
| WHCL Curriculum Chair | _____ | _____ |
| WHCCD Administrative Representative | _____ | _____ |
| WHCCD Board of Trustees Approval (no signature required) | | _____ |
| WHCL Approval Verification: | | |
| _____ | _____ | _____ |
| Print Name | Signature | Date |