

---

# SYLLABUS – EMS 113B- 1001

---

## First Responder

<b>Coordinator:</b>	<b>Debbie Azhikakath</b> Office Location: RTC 219C Phone: (775) 789-5540 Office Hours: By appointment only
<b>Instructor:</b>	<b>Cynthia Williams EMT-I</b> (Instructor of Record)
<b>Text Book:</b>	AAOS First Responder: Your First Response in Emergency Care Workbook optional
<b>Length/Time:</b>	Wednesday 6– 10p.m.

---

### I. OUR TEACHING PHILOSOPHY

---

We try to provide the best environment possible for students to learn the didactic material and psychomotor skills to become certified as a First Responder in the State of Nevada. This course will also prepare students to pass the National Registry exam in the event they would like to become nationally certified. We will be as fair as possible and give every opportunity for students to excel in the course. However, we also believe that students **MUST** be prepared to give the time and energy to the course by coming to class ready to learn and by participating in practice sessions; this means students will have read the assigned chapter prior to coming to class.

We **require** students to conduct themselves in a professional manner in the classroom/in the lab.

This course requires a great deal of **TIME** and **STUDY**. It is very difficult to catch up if you fall behind by missing class. **This course follows the DOT (Department of Transportation) standards; therefore, it is to THOSE standards the course will be conducted.**

Finally, we encourage an environment of open communication, so feel free to discuss any problems or concerns you may have. Please do this by making an appointment by calling us at the above listed telephone numbers.

---

### II. COURSE GOALS

---

The course is designed to instruct students to the level of First Responder, who serve as a vital link in the chain of the health care team. After successful completion of the program, the student will be capable of performing the following functions at the minimum entry level:

- Recognize the nature and seriousness of the patient's condition or extent of injuries to assess requirements for emergency medical care.
- Administer appropriate emergency medical care based on assessment findings of the patient's condition.
- Lift, move, position and otherwise handle the patient to minimize discomfort and prevent further injury.
- Perform safely and effectively the expectations of the job description.

The content of this course includes the following subject matter:

- Overview of the human body
- Medical-Legal-Legal Issues of EMS
- Assessing Emergency Scenes and prehospital victims
- American Heart Association Health Care Provider Certification
- Illness and Injury Emergency Care
- Emergency Childbirth and Pediatric Emergencies
- Emergency Services Operations

### III. COURSE REQUIREMENTS

---

#### A. Attendance and Participation

Learning is both content and process. Students **must** be present in order to learn. This includes active participation in class discussion and skills practice. **This means you must be punctual and do not leave class or skills labs without permission of the instructor.**

At the beginning of each class session, **ALL STUDENTS MUST SIGN THE ATTENDANCE SHEET.** Signatures on the attendance sheet must be signed in legible penmanship

The DOT (Department of Transportation) regulations state that **“students may not miss more than 8 hours of the course, or they will be dropped. NO EXCEPTIONS.”** For each session missed, **make up work is required.** If you miss either the beginning half (including being more than 15 minutes late), or the last half, you are also required to complete make-up work. See the outline for the assignment. **EACH ASSIGNMENT IS DUE WITHIN 1 WEEK OF THE ABSENCE. BE ADVISED THAT MAKE-UP WORK DOES NOT MAKE UP THE HOURS MISSED!**

**If you decide to drop the course at any time, you must drop the class from Web-Reg or go to admissions and records to receive a W, otherwise you will receive an F for the class at the end of the semester and it cannot be appealed.**

#### B. Examinations and Assignments

**You are responsible for keeping track of your grades!**

**Each evaluation is multiple choice.** You will have to use a **scantron** for the tests. There also will be **skills tests on lab days. The final and final skills test will be cumulative.**

SIX (6) Evaluations - **100 pts each**

One (1) Cumulative Final – **150 pts**

THREE (3) Skills Tests – **25 pts each**

One (1) Skills Final – **50 pts**

#### C. Grading Scale

100- 93 = A

92 - 84 = B

83 - 75 = C

74 - 70 = D

below 70 students are dropped (as per DOT regulation)

**Students MUST have a 70% cumulative average to be able to take the final State written and skills exam. If a student has less than a 70%, they will be dropped from the class at that time.**

## D. Dress Code

Students must dress in uniform. One T-shirt will be furnished to each student, and it must be worn to all class sessions. T-shirts MUST BE TUCKED IN AT ALL TIMES. Extra T-shirts are available by order for a fee of \$12.00 each. If students do not show up in uniform, they will be sent home to change. Dark pants will be worn with the T-shirts. No open toed shoes will be allowed.

## E. Ethical Conduct

Cheating on exams and quizzes is against UCCSN system policy and will not be tolerated. Any student caught cheating on an examination or displaying unethical conduct such as disturbing others during lecture or videos, argumentative or unruly behavior will meet with the following persons:

- Medical Director
- State EMS Department representative
- Course Coordinator
- Instructor and 1 teaching assistant

**Any argumentative, unruly, or threatening behavior displayed in the classroom will result in the instructor contacting the TMCC police, and participating parties will be escorted off campus.**

We ask that if you are bored with any portion of the class, please be "politely bored." Sleeping in class, reading in class, or doing other work in class will not be tolerated.

## IV. STATE PAPERWORK

---

Upon successful completion of the final skills and written exam, students will be given two forms to complete.

- 1) A white completion form signed by the medical director or coordinator.
- 2) An application form – which is completed and signed by the student.

The two forms, a copy of your CPR card (front and back) and check or money order in the amount of \$10 must be submitted to State EMS. During this time you will also be asked to fill out a course evaluation form.

## V. RECERTIFICATION

---

Your First Responder re-certification will be due in two years (Spring students, 18 months). You will receive notice of re-certification and a list of agencies providing the classes (make sure your address is current at the State office). **Do not wait until the last minute!** TMCC always provides re-certification classes during the months of September, October, and November. **TMCC offers CPR renewal during this class as it is the responsibility of the First Responder to keep their CPR certification current and proof of CPR certification must be sent in with renewals.**

## VI. SEXUAL HARASSMENT

---

See college catalog for TMCC's policy on sexual harassment.

## VII. AMERICANS WITH DISABILITIES ACT (ADA) AND ACCOMMODATION SERVICES

---

Qualified students with documented disabilities have the right to free accommodations to ensure equal access to educational opportunities at Truckee Meadows Community College. For assistance and clarification of services provided under the ADA, contact the Disabled Student Services Office, 673-7277 or 673-7286.

## Memorandum of Understanding

I, \_\_\_\_\_, acknowledge that I received a copy of the course syllabus and course outline. I understand I have enrolled in a class that is held to higher grading standards than that of normal TMCC courses and will do my best to maintain the higher standard. I have had an opportunity to ask questions regarding my expectations. I further agree to abide by these standards and expectations, which includes the ethical and behavioral standards.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Telephone Number (best number to be reached)

\_\_\_\_\_  
E-mail

(The above information is used ONLY by the instructor/coordinator and her assistant and will not be given to any unauthorized persons.)