



# **Emergency Medical Services**

## **Education Programs**

Student Handbook

A large, red, 3D geometric graphic consisting of several interconnected rectangular blocks of varying sizes, creating a complex, angular shape that spans the width of the page.

**2025**

## Contents

Description of EMS Professions .....	4
Paramedic Functional Job Analysis and Technical Standards .....	5
EMS Occupational Risk .....	6
Grady Memorial Hospital History .....	7
Grady EMS History .....	9
Grady EMS Academy History .....	10
Program Goals and Learning Outcomes .....	11
Emergency Medical Technician (EMT) Course Description .....	12
Emergency Medical Technician (EMT) Course Curriculum .....	12
Advanced Emergency Medical Technician (AEMT) Course Description .....	13
Advanced Emergency Medical Technician (AEMT) Course Curriculum .....	14
Paramedic Program Course Description .....	15
Paramedic Program Course Curriculum .....	16
Student Affairs .....	19
Admissions Procedure .....	19
Withdrawal and Refund Policy .....	20
No-Show Policy .....	20
Re-admission Policy.....	21
Program Competencies .....	21
Competency-Based Courses .....	21
Rights & Responsibilities .....	21
Student Expectations .....	22
Health Insurance Portability and Accountability Act (HIPAA) .....	22
Family Education Rights and Privacy Act (FERPA) .....	22
Americans with Disabilities Act (ADA) .....	22



## Contents

Students Employed by Grady Health System .....	23
Course Credit .....	23
Transfer Students .....	24
Advanced Placement .....	24
Experiential Learning Credit .....	24
Articulation Agreements .....	24
Change in Name or Address .....	24
Transcripts .....	24
Licensure and Certifications .....	24
Uniform Dress Code .....	25
Hours Wear .....	25
Clinical/Internship Experiences .....	25
Incident Reports .....	26
Academic Honesty .....	26
Digital Courtesy .....	26
Classroom Participation .....	26
Attendance Policies .....	26
Tardiness .....	27
Reading Assignments .....	27
Evaluations .....	27
Grading .....	27
Student Drug and Alcohol Testing .....	28
Participant Health and Safety .....	28
Grounds for Dismissal .....	28
Grievance Policy .....	29
Program Evaluation .....	29
Frequently Asked Questions .....	29
Disclaimer .....	30

## Description of the EMS Professions

EMTs and Paramedics have fulfilled prescribed requirements by a credentialing agency to practice the art and science of out-of-hospital medicine in conjunction with physician oversight. Through performance of assessments and delegated medical practice, their goal is to prevent and reduce mortality and morbidity due to illness and injury. EMTs and Paramedics primarily provide care to emergency patients in an out-of-hospital setting.

EMTs and Paramedics possess the knowledge, skills and attitudes consistent with the expectations of the public of medical professionals. EMTs and Paramedics recognize that they are an essential component of the continuum of care and serve as linkages among health resources.

EMTs and Paramedics strive to maintain high quality, reasonable cost health care by delivering patients directly to appropriate facilities. As an advocate for patients, paramedics seek to be proactive in affecting long term health care by working in conjunction with other provider agencies, networks, and organizations. The emerging roles and responsibilities of the EMT and Paramedic include public education, health promotion, and participation in injury and illness prevention programs. As the scope of service continues to expand, the EMT and Paramedic will function as a facilitator of access to care, critical care practitioners, as well as an initial treatment provider.

EMT and Paramedic are responsible and accountable to medical direction, the public, and their peers. EMTs and Paramedics recognize the importance of research and actively participate in the design, development, evaluation and publication of research. EMTs and Paramedics seek to take part in life-long professional development, peer evaluation, and assume an active role in professional and community organizations.



## Paramedic Functional Job Analysis and Technical Standards

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. 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 hypnotics, anti-convulsants, central nervous stimulants, psychotherapeutics which include antidepressants, and other anti-psychotics, anticholinergics, cholinergics, 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, is imperative. The Paramedic must also take into consideration the possible risks of medication administered to a pregnant mother and the fetus, keeping in mind that 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 is essential. Once medication is stopped or not used, the Paramedic must send back unused portions to proper inventory area.

The Paramedic must be able to apply basic principles of mathematics to the calculation of problems associated with medication dosages, perform conversion problems, 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 Paramedics, and other workers well being must not be jeopardized.

### **Comments**

The Paramedic provides the most extensive pre-hospital care and may work for fire departments, 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 a 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 analysts opinion, the Paramedic must be flexible to meet the demands of the ever-changing emergency scene. When emergencies exists, 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 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.

*Source: USDOT 1998 National Standard Paramedic Curriculum*

## EMS Occupational Risk

Provision of Emergency Medical Services (EMS) poses inherent occupational risk for first responders at all levels of training and licensure. Risk may include the following:

- Exposure to environmental elements
  - Domestic or wild animals
  - Extreme heat or cold resulting in Hyper/Hypothermia
  - Rain
  - Sleet, Ice, Snow
  - Wind
- Exposure to infectious disease
- Exposure to hazardous or harmful chemical
- Falls
- Fires
- Lifting injuries
- Motor vehicle accidents/crashes
- Musculoskeletal injuries
  - Broken Bones
  - Dislocations
  - Sprains
  - Strains
- Psychological Trauma
- Verbal threats or aggression
- Violence and possibly assault



## Grady Memorial Hospital

Grady Memorial Hospital (or as known colloquially as “Grady”) is the flagship of Grady Health System. With a licensed bed capacity of 953, it is the largest hospital in the state of Georgia and the fifth largest in the United States. “The Grady Hospital” was established in 1890 and opened its doors as the first public hospital for the City of Atlanta June 2, 1892. This three-story, 110 bed facility was located at the intersection of Butler Street and Coca-Cola Place and named in memory of Henry Woodfin Grady (1850-1889) (History Atlanta, 2015). As an orator and managing editor at the Atlanta Constitution, Henry Woodfin Grady was heavily involved in promoting the idea of a public hospital in 19<sup>th</sup> century Atlanta and known for championing postbellum industrialization of the South (Davis, 2002).

By the end of the 19<sup>th</sup> century, The Grady Hospital experienced significant growth. In 1912 the organization purchased the entire block and added a new building called Bulter Hall—the second Grady Hospital. When Bulter Hall was erected, it would bring plurality to “The Grady Hospital” and subsequently be the cause of an unofficial name change from “The Grady Hospital” to “The Gradys”. The addition of Hirsch Hall and racial segregation within current facility (erected in the mid-1950s) also contributing to the plurality of The Grady Hospital.

Today both Hirsch and Bulter Hall have been demolished and segregation has long since been abolished. Grady Memorial Hospital is now a Joint Commission accredited facility functioning as a safety net hospital as it provides services to a large proportion of Atlanta’s low-income population. While remaining committed to its mission of providing healthcare services to the underserved populations, Grady also while provides a full-range of specialized medical services to all members of the community. Most Georgians know Grady for trauma care and emergency medical services but they are learning to reach out to Grady for other specialized services.



Members of the medical profession know Grady Health System. It is staffed exclusively by physicians from Emory University School of Medicine and Morehouse School of Medicine. Twenty-five percent of all doctors actively



practicing medicine in Georgia have received a portion or all of their training at Grady. Grady is also an internationally renowned as it is host to physicians-in-training from all over the world and has achieved The Gold Seal of Approval from **The Joint Commission**. To view a summary of the Quality Report for Grady Health System, please go to [https://www.qualitycheck.org/quality-report/?keyword=grady%20memorial%20hospital&sitestate=GA&ajax=1&json=1&callback=jQuery11020045297784016863796\\_1525342797076&\\_1525342797077&bsnid=3506](https://www.qualitycheck.org/quality-report/?keyword=grady%20memorial%20hospital&sitestate=GA&ajax=1&json=1&callback=jQuery11020045297784016863796_1525342797076&_1525342797077&bsnid=3506).

### The Value of Joint Commission Accreditation & Certification

Through the accreditation process, organizations learn state-of-the-art performance-improvement strategies in order to continuously improve the safety and quality of care, which can reduce the risk of errors and the cost of liability insurance coverage. It also provides invaluable education, whether that's through our support and education services, advice and counsel from surveyors during the on-site survey, or practical tools, such as The Leading Practice Library or Targeted Solutions Tools – interactive web-based tools from the Joint Commission Center for Transforming Healthcare that allow accredited organizations to measure their performance and find customized solutions.

From The Joint Commission's website: <https://www.qualitycheck.org/the-value-of-accreditation-certification/>

## Grady Emergency Medical Services

After opening its doors to the sick and injured of Atlanta, Grady Memorial Hospital decided that it would need an ambulance service to move patients from various locations within the city to its doors to benefit from medical care. Grady's first ambulances were horse-drawn enclosed wagon staffed by interns and occasionally surgeons equipped with a medical bag stocked with instruments proven helpful in treating battlefield injuries in 30 years prior.

As time progressed so did the transportation services provided by Grady Memorial Hospital. In the 1910s and through the 1920s, patients would be transported in Ford Model T Grady Ambulances but Grady would have to compete with local funeral homes also offering patient transportation services in hearses readily modified to accommodate the living. In the 1930s and through World War II, Grady would use Packards (an American luxury vehicle modified to accommodate patient-on-stretcher transport) as the mode for transporting patients including casualties of the great Winecoff Hotel Fire of 1946 and Margaret Mitchell, the author of *Gone With the Wind*. In the 1950s, the City of Atlanta would take over operation of the hospital and facilitate transition to the GMC truck chassis driven by a "special officer" of the Atlanta Police Department.

In the 1960s, Grady Ambulance Services was officially established. The Atlanta Police Department would still dispatch ambulances the units would be staffed with attendants who were skilled in "Advanced First Aid" as indicated by a patch on the left shoulder and/or recognized by the American Academy of Orthopaedic Surgeons (AAOS) as Emergency Medical Technicians (EMTs) as indicated by a patch on their right shoulder. By 1966, the "White Paper" also known as "Accidental Death & Disability: The Neglected Disease of Modern Society" was published. The report brought the lack of uniform laws and standards for ambulance operations to light, prompting a cascade of emergency medical care and transportation initiatives. In 1968 the AAOS to publish the first EMS textbook called, *Emergency Care and Transportation of the Sick and Injured* in 1968. The American Telephone and Telegraph would decide to reserve 9-1-1 for emergency use in 1969 and the National Registry of Emergency Medical Technicians would be established in 1970. In 1973 the Emergency Medical Service Systems Act was passed and in 1975 the American Medical Association began recognizing Emergency Medicine as a specialty; Nancy Caroline, MD was awarded the contract for the first EMT-Paramedic National Standard Curriculum; and the National Association of Emergency Medical Technicians was formed.

As an institution that has thrived on remaining ahead of the curve, Grady Memorial Hospital recruited several of its initial Paramedics from Georgia's first paramedic class held at DeKalb Community College in 1976. Grady Ambulance would also benefit from donations from a private grant donor which funded 44 regional EMS projects across the country. These grant dollars funded the purchase radio communications and EKG telemetry and defibrillator systems for Grady Ambulances and would facilitate a uniform standard and name change to Grady Emergency Medical Services.



## Grady EMS Education Academy

In the 1980s, 1990s, and through the turn of the century, Grady Emergency Medical Services remained the primary EMS authority for the City of Atlanta within Fulton County. Graduates from the local EMS education programs would continue to be recruited and on-boarded to serve. Through the support of the Schools of Medicine at Emory University and Morehouse College, Grady Emergency Medical Services has enhanced itself in both the training its EMS providers receive and the services they provide to the sick and injured. In 2011 Grady Emergency Medical Services partnered with Atlanta Technical College to become a satellite to begin offering Paramedic education as an employee benefit to promote employee engagement and longevity. The satellite Paramedic Training Program was well received and it produced 8 home-grown Paramedics. With such success, Grady Emergency Medical Services decided to continue offering the employee benefit but to do it under the auspices of Grady Health System and sought to become a hospital-based program accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). From 2012 to late 2014, Grady Emergency Medical Services acquired resources required to host a Paramedic education program as it completed its Initial Self-Study Report (ISSR). Once the resources were in order, the ISSR was submitted to the Committee on the Accreditation of Educational Programs for the EMS Professions (CoAEMSP) for evaluation. On May 15<sup>th</sup> of 2015, CAAHEP awarded the Grady Health System Paramedic Training Program its initial accreditation.

During the process of self-study for CAAHEP Accreditation, Grady Emergency Medical Services decided to also engage citizens of the local community by providing a pathway to employment. What was to become a single program known as the Grady Health System Paramedic Training Program became a portfolio of programs known as Grady EMS Education Academy, with initial EMS education offerings in for those interested in becoming an EMT, an Advanced EMT, or a Paramedic.

Today, Grady EMS Education Academy is a regional learning center that offers premier initial education and staff development opportunities. Programs in initial education include the Emergency Medical Technician Program, the Advanced Emergency Medical Technician Program and the Paramedic Program. Each of the programs in this portfolio provides knowledge, skills, and abilities that far exceed the National EMS Education Standards developed by the National Highway Traffic Safety Administration as well as those promulgated by the Georgia Department of Public Health's Office of Emergency Medical Services and Trauma. Program graduates will not only be prepared to challenge and pass the National Registry certification examinations, they will become technically skilled critical thinkers ready to fill a growing need for advanced providers in the pre-hospital setting. All educators take a multivariate approach to ensure students are provided with a strong foundation built upon a commitment to patient-centered care, ethical actions, medical research, life-long learning, and to uphold educational standards set forth by the Grady EMS Education Academy, The State office of EMS and Trauma, and CAAHEP.





## GRADY EMS EDUCATION ACADEMY GOALS FOR LEARNING OUTCOMES

### **Goal 1: Students will be clinically competent during all phases of the program.**

#### Learning Outcomes

- 1.1 Students will demonstrate clinical competence in knowledge, skills and professional behaviors
- 1.2 Students will demonstrate a continual commitment to safety in all spheres of the program
- 1.3 Students will demonstrate the ability to competently assess situations and patients
- 1.4 Students will demonstrate competent clinical decision-making in treating each patient's condition
- 1.5 Students will practice evidence based medicine

### **Goal 2: Students will communicate effectively.**

#### Learning Outcomes

- 2.1 Students will demonstrate effective patient communication skills
- 2.2 Students will demonstrate effective oral communication
- 2.3 Students will demonstrate effective written communication skills

### **Goal 3: Students will use critical thinking and problem-solving skills.**

#### Learning Outcomes

- 3.1 Students will identify ethical dilemmas.
- 3.2 Students will demonstrate critical thinking and decision-making skills.
- 3.3 Students will adapt procedures for trauma, medical, special populations, and age-specific patients
- 3.4 Students will recognize emergency patient conditions and formulate intervention

### **Goal 4: Students will demonstrate professional development and growth.**

#### Learning Outcomes

- 4.1 Students will develop a desire for life-long learning
- 4.2 Students will formulate personal development plans for their career
- 4.3 Students will critique their and others clinical abilities and behaviors
- 4.4 Students will analyze community healthcare needs
- 4.5 Students will evaluate methods to provide continuing medical education

### **Goal 5: Students will behave in an ethical, honest, and professional manner**

#### Learning Outcomes

- 5.1 Students will demonstrate a clinically professional work ethic
- 5.2 Students will demonstrate dependability in all clinical spheres
- 5.3 Students will demonstrate clinical confidence
- 5.4 Students will demonstrate the ability to function as an integral part of the healthcare team

### **Goal 6: The program will measure ongoing effectiveness.**

#### Program Outcomes

- 6.1 Students will complete the program within 16 months.
- 6.2 Graduates will pass the National Registry certification exam on the first attempt.
- 6.3 Graduates are employed within 6 months post-graduation
- 6.4 Graduates will be satisfied with their education.
- 6.5 Employers will be satisfied with the graduate's education.

## Grady EMS Education Academy Programs of Study

### Emergency Medical Technician (EMT) Program Description

The Emergency Medical Technician certificate program prepares students to provide basic emergency medical care for critical and emergent patients who access the emergency medical system. This individual possesses the basic knowledge, skills, and abilities necessary to provide patient care and transportation and perform functional part of a comprehensive EMS response. Under medical direction, EMTs perform interventions with the basic equipment typically found on an ambulance. The emergency medical technician is a link from the scene to the emergency healthcare system. Successful completion of the program allows the graduate to take the National Registry of Emergency Medical Technicians EMT certification examination. This program is approved by the Georgia Department of Public Health, Office of EMS and Trauma. To learn more about the career, go to [www.nremt.org](http://www.nremt.org) (Program Length: 20 weeks; 260 contact hours).

### Emergency Medical Technician (EMT) Curriculum

#### **EMSP 110: Introduction to the EMS Profession for Emergency Medical Technician (EMT)**

Prerequisite: EMT Program Admission.

*This course serves as the introductory course to the Emergency Medical Services (EMS) profession. It orients the student to the pre-hospital care environment and issues related to the provision of patient care. It further provides foundational information upon which subsequent curriculum content and allows students to apply the fundamental knowledge, skills, and attitudes gained in order to effectively communicate and function safely, ethically and professionally within the emergency medical services environment. (30 Contact Hours)*  
*Topics include: EMS Systems, Workforce Safety and Wellness, Medical/Legal and Ethics, Communication and Documentation, Medical Terminology, Anatomy and Physiology, Pathophysiology, Lifting and Moving Techniques.*

#### **EMSP 120: Patient Assessment, Airway Management, & Pharmacology for EMT**

Prerequisite: Successful completion of EMSP 110.

*This course prepares students for initial scene management, assessment of the medical patient, as well as basic airway management. This course also provides an introduction into basic pharmacology and medications administered within the EMT scope of practice. Students will apply scene information and patient assessment findings to guide management of patient care. (40 Contact Hours)*  
*Topics include: Scene Size-Up, Primary Assessment, History Taking (SAMPLE/OPQRST Mnemonic), Secondary Assessment, Basic Airway Management, Principles of Pharmacology, Medication Administration and Emergency Medications, Basic Life Support (CPR/AED) for the Healthcare Provider.*

#### **EMSP 130: Medical Emergencies for EMT**

Prerequisite: Successful completion of EMSP 110 and 120.

*This course integrates pathophysiological principles and assessment findings to formulate a field impression and implement the treatment plan of cases involving medical emergencies. (40 Contact Hours)*  
*Topics include: Medical Overview, Shock, Respiratory, Cardiovascular, Neurological, Abdominal and Gastrointestinal Disorders, Endocrine Disorders, Hematology, Immunology, Infectious Disease, Toxicology, Genitourinary/Renal, Musculoskeletal Disorders, Diseases of the Eyes, Ears, Nose, and Throat.*

#### **EMSP 140: Shock and Trauma for EMT**

Prerequisite: Successful completion of EMSP 110, 120, and 130.

*This course is designed to prepare the EMT student to apply pre-hospital emergency care to patients who have sustained traumatic injuries. Special considerations in trauma related injuries will be presented including the physiology of shock as well as multi-system trauma and environmental emergencies. (45 Contact Hours)*  
*Topics include: Shock and Resuscitation, Trauma Overview, Bleeding, Chest Trauma, Abdominal and Genitourinary Trauma, Orthopedic Trauma, Soft Tissue Trauma, Head, Facial, Neck, and Spine Trauma, Nervous System Trauma, Special Considerations in Trauma, Environmental Emergencies, and Multi-System Trauma*





**EMSP 150: Special Patient Populations for EMT**

Prerequisite: Successful completion of EMSP 110, 120, 130, and 140.

This course provides a fundamental knowledge of growth, development, and aging and assessment findings to provide emergency care and transportation for a patient with special needs. (25 Contact Hours)

*Topics include: Obstetrics, Gynecology, Neonatal Care, Pediatrics, Geriatrics, Patients with Special Challenges, and Psychiatric Emergencies.*

**EMSP 160: Introduction to Ambulance Operations, Hazardous Material and Crisis Situations for the EMT**

Prerequisite: Successful completion of EMSP 110, 120, 130, 140, 150.

This course provides introductory and fundamental knowledge to the EMT student about emergency vehicle operations, introduction to the basis of patient [vehicle] extrication, introduction to incident command system (ICS), and being able to recognize and understand their role in a hazardous material situation as well as terrorism attack and disaster management.

*Topics include: Principles of Safe Ambulance Operations, Aero-Medical Operations, Vehicle Extrication, Incident Management, Hazardous Material, Terrorism Response and Disaster Management.*

**EMSP 125: Clinical and Field Experience for the EMT**

Prerequisite: Successful completion of EMSP 110. EMSP 120, EMSP 130, EMSP 140, EMSP 150 and acceptable affect for live patient interaction.

This course incorporates two separate experiences to expose the EMT student to different aspects of their profession.

During the Emergency Room clinical setting, and under the supervision of a Clinical Preceptor, the EMT student will seek opportunities to naturalize the skill of performing a comprehensive patient assessment, physical examination, and utilization of their skills within their scope of practice. During the EMS field setting, and under supervision of an approved EMS preceptor, the EMT student will observe and participate in guided practice within their scope of practice in the EMS pre-hospital environment. The student is expected to become a contributing member of an EMS team and use this time to integrate into the team as a functional Emergency Medical Technician in a pre-hospital setting. A minimum of 2-13 hour EMS field shifts are required. (50 contact hours).

## **Advanced Emergency Medical Technician (AEMT) Program Description**

The Advanced Emergency Medical Technician certificate program prepares students to provide basic and limited advanced emergency medical care for critical and emergent patients who access the emergency medical system. This individual possesses the basic knowledge, skills, and abilities necessary to provide patient care and transportation and perform functional part of a comprehensive EMS response. Under medical direction, AEMTs perform interventions with the basic equipment typically found on an ambulance. The AEMT is a link from the scene to the emergency healthcare system. The program provides opportunities to upgrade present knowledge and skills from the EMT level. Successful completion of the program allows the graduate to take the National Registry of Emergency Medical Technicians AEMT certification examinations. This program is approved by the Georgia Department of Public Health, Office of EMS and Trauma. To learn more about the career to to [www.nremt.org](http://www.nremt.org). (Program Length: 20 weeks; 303 contact hours).



## Advanced Emergency Medical Technician (AEMT) Curriculum

### EMSP 210: Fundamental Concepts for Advanced EMT

Prerequisite: Current and Active NREMT EMT Certification, AEMT Program Admission.

This course serves as the introductory course to the role of the Advanced Emergency Medical Technician (AEMT). It builds upon previous knowledge learned in the EMT course of study. It further provides foundational information upon which subsequent curriculum content and allows students to apply the fundamental knowledge, skills, and attitudes gained in order to effectively communicate and function safely, ethically and professionally as an AEMT (30 contact hours). *Topics include: EMS Systems, Workforce Safety and Wellness, Medical/Legal and Ethics, Medical Terminology, Anatomy and Physiology, Pathophysiology, Communication and Documentation, Principles of Safe Ambulance Operations, Vehicle Extrication, Incident Management, and Aero-Medical Operations.*

### EMSP 220: Airway Management & Pharmacology for Advanced EMT

Prerequisite: Successful completion of EMSP 210.

This course integrates knowledge of anatomy, physiology, and pathophysiology into the assessment to develop and implement a treatment plan with the goal of assuring a patent airway, adequate ventilation, and respiration for patients of all ages. This course also provides the student with knowledge of pharmacology required to formulate and administer a pharmacological intervention to mitigate emergencies and improve the overall health of the patient (45 contact hours). *Topics include: Airway Assessment and Management, Use of Supraglottic Airways, Airway Management, Intravenous and Intraosseous Therapy, Emergency Medications, and Medication Administration.*

### EMSP 230: Medical Emergencies for Advanced EMT

Prerequisite: Successful completion of EMSP 210 and 220.

This course provides opportunities to apply fundamental knowledge of basic and selected advanced emergency care and transportation based on assessment findings for an acutely ill patient; a patient in shock, respiratory and cardiac failure or arrest, and post resuscitation management. In addition it provides a fundamental knowledge of growth, development, and aging and assessment findings to provide basic and selected advanced emergency care and transportation for a patient with special needs (40 contact hours). *Topics include: Cardiology; Toxicology; Medical Overview; Neurology; Immunology; Infectious Disease; Endocrine Disorders; Respiratory; Hematology; Genitourinary/Renal; Shock and Resuscitation and Integration of Medical/Trauma Assessments; 12-lead EKG Acquisition, End Tidal CO2 Monitoring, CPAP/BiPAP, Advanced Airway Management, and Cardiac Life Support.*

### EMSP 240: Shock and Trauma for Advanced EMT

Prerequisite: Successful completion of EMSP 210, 220, 230.

This course provides opportunities to apply fundamental knowledge of basic and selected advanced emergency care and transportation based on assessment findings for an acutely injured patient (45 contact hours). *Topics include: Shock and Resuscitation; Chest Trauma; Abdominal and Genitourinary Trauma; Orthopedic Trauma; Head, Facial, Neck, and Spine Trauma; Nervous System Trauma; and Integration of Medical/Trauma Assessments.*

### EMSP 250: Special Patient Populations for Advanced EMT

Prerequisite: Successful completion of EMSP 210, 220, 230, and 240.

This course provides a fundamental knowledge of growth, development, and aging and assessment findings to provide emergency care and transportation for a patient with special needs (20 contact hours). *Topics include: Obstetrics, Gynecology, Neonatal Care, Pediatrics, Geriatrics, Patients with Special Challenges, and Special Patient Populations.*

### EMSP 260: Advanced EMT Capstone

Prerequisite: Successful completion of EMSP 210, 220, 230, 240, and 250.

This course provides the student with a final opportunity to incorporate their cognitive knowledge and psychomotor skills through labs and scenario-based practice and evaluations prior to taking the National Registry Computer Based

and Practical examinations. Technical skills attainment (TSA) for each student will be compiled and/or documented within this course as required by the SOEMS (30 contact hours). *Topics include: Trauma Assessment, Medical Assessment, Alternative Airway Device, Cardiac Arrest Management/AED, Pediatric IO and Respiratory Compromise, IV Therapy, IV Medication Administration, Spinal Immobilization-Supine, Spinal Immobilization-Seated, Joint and Long Bone Immobilization, and Bleeding Control/Shock Management.*

#### **EMSP 225: Clinical Applications for Advanced EMT**

Prerequisite: Acceptable Didactic/Laboratory Behaviors.

Under the direct supervision of a Clinical Preceptor, the student will seek opportunities to naturalize the skill of performing a comprehensive patient assessment and physical examination. Students will also practice consistent and proper use of personal protective equipment, body mechanics, patient movement/transfer, situation awareness, basic airway management, medication administration and venous access. All patient contacts are to be documented in the skills tracking feature in FISDAP or Platinum Planner. Students are required to schedule, attend, and document 3-12 hour (36 hours) shifts during this clinical rotation. Students must demonstrate acceptable performance in the clinical setting; performance will be evaluated by the Clinical Preceptor (36 contact hours).

#### **EMSP 299: Field Internship for Advanced EMT**

Prerequisite: Acceptable Didactic/Laboratory Behaviors.

Advanced Emergency Medical Technician students will observe and participate in guided practice in the EMS environment of care. The student is expected to become a contributing member of an EMS team and use this time to integrate into the team as a functional Emergency Medical Technician in a pre-hospital health care provider. All skills/assessments are to be performed under the direct supervision of an EMS Preceptor. All patient contacts and interventions are to be documented (exactly as performed) in the skills tracking feature of FISDAP or Platinum Planner. Students are required to schedule, attend, and document 39 hours of EMS Field Experience. This course will be concurrent with EMSP 225 (39 contact hours).

## **Paramedic Program Course Description**

The goal of the Paramedic program is to **"prepare students for employment in paramedic positions and to prepare Paramedic who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession."** (CAAHEP, 2015) The Paramedic certificate program prepares students to provide advanced emergency medical care for critical and emergent patients who access the emergency medical system. This individual possesses the complex knowledge, skills, and abilities necessary to provide patient care and transportation and perform functional part of a comprehensive EMS response. Under medical direction, Paramedics perform interventions with the basic and advanced equipment typically found on an ambulance. The Paramedic is a link from the scene to the emergency healthcare system. The Paramedic certificate program provides learning opportunities that introduce, develop, and reinforce academic and occupational knowledge, skills, and attitudes required for job acquisition, retention, and advancement. The program provides opportunities to upgrade present knowledge and skills from the AEMT level. Successful completion of the program allows the graduate to take the National Registry of Emergency Medical Technicians Paramedic certification examinations. This program is approved by the Georgia Department of Public Health, Office of EMS and Trauma. To learn more about the career, go to [www.nremt.org](http://www.nremt.org).

The Paramedic certificate program is accredited by the Commission on Accreditation of Allied Health Education Programs ([www.caahep.org](http://www.caahep.org)) upon the recommendation of the Committee on Accreditation for Educational Programs for the Emergency Medical Services Profession ([www.CoAEMSP.org](http://www.CoAEMSP.org)).

#### **Commission on Accreditation of Allied Health Education Programs**

9355 - 113th St. N, #7709

Seminole, Florida 33775

Phone: 727- 210-2350

Fax: 727-210-2354

[www.caahep.org](http://www.caahep.org)



EMS Education Programs Student Manual

Revised June 2025

Successful completion of the program allows the graduate to take the National Registry of Emergency Medical Technicians (NREMT) Paramedic certification examination and apply for licensure with the Georgia State Office of Emergency Medical Services and Trauma (SOEMST) as a paramedic.  
(Program Length: 16 months; minimum 1164 contact hours)

## Paramedic Program Course Curriculum

### **EMSP 310: Foundations for Paramedics**

Prerequisite: Current and Active NREMT Advanced EMT Certification, Acceptance into Paramedic Program. Foundations in Paramedicine was constructed to achieve two objectives: 1) to prompt the student to review concepts from the Advanced Emergency Medical Technician curriculum and 2) reestablish a foundation upon which a new cognitive, psychomotor, and affective infrastructure may be built. Because it is a Paramedic Program preparatory course, it will challenge the student but mastery of the concepts will bolster his/her academic prosperity in successive courses of the Program. Upon completion, students will be primed to apply elements from this course throughout the Paramedic Program but also rely on them as Clinicians.

*Topics include: EMS Systems; Workforce Safety and Wellness; Public Health; Personal Protective Equipment; Proper Lifting and Moving Techniques; Communications; Documentation; Medical, Legal, and Ethical Issues; Legal Case Studies; Quality Assurance/Improvement; Life Span Development; Medical Terminology; Anatomy & Physiology; Pathophysiology; Applications of Pathophysiology; Critical Thinking & Decision Making; Patient Assessment and Exam; Pharmacology; and Medication Administration.*

### **EMSP 320: Concepts in Emergency and Resuscitation Care for Paramedics**

Prerequisite: Successful completion of EMSP 310.

Concepts in Emergency and Resuscitation Care for Paramedics was constructed to achieve two objectives: 1) to prompt the student to review concepts from the Advanced Emergency Medical Technician curriculum and 2) continue building upon the foundation established by previous courses in areas of cognitive, psychomotor, and affective learning domains. This course will introduce the student to concepts in airway management, respiratory emergency management, cardiology, and cardiovascular emergency care. Upon completion, students will be able to apply elements from this course to the clinical setting, and throughout the remainder of the curriculum. Course material will be foundational, particularly in regards to airway management, in future didactic and clinical courses involving airway management.

*Topics include: Review of applicable Anatomy & Physiology and Pathophysiology; Airway Management; Respiratory Emergencies; Cardiovascular Emergencies; Cardiology; ECG and 12-Lead ECG Interpretation; and Advanced Cardiac Life Support.*

### **EMSP 330: Concepts in Emergency Medical Care for Paramedics**

Prerequisite: Successful completion of EMSP 310, EMSP 320, EMSP 325.

Concepts in Emergency Medical Care for Paramedics was constructed to achieve two objectives: 1) to prompt the student to review concepts from the Advanced Emergency Medical Technician curriculum and 2) continue building upon the foundation established by previous courses in areas of cognitive, psychomotor, and affective learning domains. This course will introduce the student to concepts in emergency medical care and apply advanced patient assessment techniques in order to develop clinician level differential diagnoses. Upon completion, students will be able to apply elements from this course to the clinical setting, and throughout the remainder of the curriculum. Course material will be fundamental to student success as a paramedic practitioner, and continues to develop foundational topics in pathophysiology and previous course material and knowledge.

*Topics include: Review of applicable Anatomy & Physiology and Pathophysiology; Diseases of the eyes, ears, nose, & throat; Neurological Emergencies; Psychiatric Emergencies; Abdominal, Gastrointestinal, Gynecological, Genitourinary, Renal, Endocrine, and Hematological Emergencies; Immunological Emergencies; Infectious Diseases, and Toxicological Emergencies; Advanced Medical Life Support.*



**EMSP 340: Concepts in Emergency Trauma Care for Paramedics**

Prerequisite: Successful completion of EMSP 310, EMSP 320, EMSP 325, EMSP 330, and EMSP 335.

Concepts in Emergency Trauma Care for Paramedics was constructed to achieve two objectives: 1) to prompt the student to review concepts from the Advanced Emergency Medical Technician curriculum and 2) continue building upon the foundation established by previous courses in areas of cognitive, psychomotor, and affective learning domains. This course will introduce the student to concepts in emergency medical care and apply advanced patient assessment techniques in order to develop clinician level differential diagnoses. Upon completion, students will be able to apply elements from this course to the clinical setting, and throughout the remainder of the curriculum. Course material will be fundamental to student success as a paramedic practitioner, and continues to develop foundational topics in pathophysiology and previous course material and knowledge.

*Topics include: Review of applicable anatomy & physiology and pathophysiology; Trauma Systems and MOI; Bleeding; Soft-tissue Trauma; Burns; Face/neck/head/spine trauma; Chest Trauma; Abdominal/GU Trauma; Orthopedic Trauma; Environmental Emergencies; Management & Resuscitation of a Critical Patient ; and Prehospital Trauma Life Support (Advanced).*

**EMSP 350: Concepts in Special Population Emergency Care for Paramedics**

Prerequisite: Successful completion of EMSP 310, EMSP 320, EMSP 325, EMSP 330, EMSP 335, EMSP 340, and EMSP 345.

Concepts in Special Population Emergency Care for Paramedics was constructed to achieve two objectives: 1) to prompt the student to review concepts from the Advanced Emergency Medical Technician curriculum and 2) continue building upon the foundation established by previous courses in areas of cognitive, psychomotor, and affective learning domains. This course will introduce the student to concepts in emergency medical care and apply advanced patient assessment techniques in order to develop clinician level differential diagnoses. Upon completion, students will be able to apply elements from this course to the clinical setting, and throughout the remainder of the curriculum. Course material will be fundamental to student success as a paramedic practitioner, and continues to develop foundational topics in pathophysiology and previous course material and knowledge.

*Topics include: Review of applicable anatomy & physiology and pathophysiology; Obstetric Emergency Care; Neonatal Emergency Care; Pediatric Emergency Care; Geriatric Emergency Care; Emergency Care for Patients with Special Challenges; and Psychological Trauma in EMS Patients.*

**EMSP 360: Extensions of the Paramedic Care Provider**

Prerequisite: Successful completion of EMSP 310, EMSP 320, EMSP 330, EMSP 340, EMSP 350.

Extensions of the Paramedic Care Provider was constructed to achieve three objectives: 1) to prompt the student to review concepts from the Advanced Emergency Medical Technician curriculum; 2) to continue building upon the foundation established by previous courses in areas of cognitive, psychomotor, and affective learning domains; and 3) reinvent the way operational and special topic information was presented and applied in a unique learning environment. This course will introduce the student to concepts in special operations topics. Upon completion, students will be able to apply elements from this course to the clinical and operational setting, and throughout the remainder of the curriculum. Course material will be fundamental to student success as a paramedic practitioner. Course culminates in a dynamic mass casualty exercise designed to apply learned incident command management principles to a mock incident utilizing comprehensive incident management tools/kits.

*Topics include: Transportation Operations; Vehicle Extrication & Special Rescue; Hazardous Materials Awareness; Incident Management systems; Terrorism Response; Crime Scene Awareness; Disaster Response; Career Development, EMS Safety; Tactical Emergency Casualty Care; and All Hazards Disaster Response.*

### **EMSP 370: Practical Application for Paramedic Practice**

Prerequisite: Successful completion of EMSP 310, EMSP 320, EMSP 330, EMSP 340, EMSP 350, EMSP 360. All Platinum documentation must be completed and entered into LMS.

Practical Application for Paramedic Practice was constructed to achieve two objectives: 1) to provide a summative application of the entire Paramedic Program in one unique course to ensure the student is prepared for National Registry of EMT's cognitive and psychomotor testing and 2) ensure the student is ready to enter paramedic practice as a beyond entry-level paramedic provider that demonstrates mastery of programmatic content. This course will consist of multiple cognitive and psychomotor assessments that cover the entirety of the program material and learning objectives. Students will participate in a Medical Director Terminal Competency assessment of their learning and ability in a scenario based environment.

Successful completion of EMSP 370 is crucial to receive the medical director's endorsement. This signifies the student has met the paramedic program's minimal standards, thus authorizing the student to challenge the National Registry of Emergency Medical Technician (NREMT) paramedic certification examination.

*Topics include: Decision Making & Problem Solving application and review, including the use of conceptual patient care scenarios.*

### **Clinical Engagement Sessions for the Paramedic (EMSP 325, EMSP 335, EMSP 445, EMSP 355, EMSP 365)**

Prerequisite: Completion of corresponding previous didactic/lab course.

Clinical Engagement Sessions for the Paramedic serves as a running comprehensive clinical experience that augments the didactic and lab experiences encountered throughout the Paramedic Program courses. Newly realized for 2020, clinical courses are executed as an umbrella course that encompasses multiple Clinical Engagement Sessions (CES) in order to maximize the cognitive, psychomotor, and affective areas of Paramedicine in an enhanced format to optimize the learning experience. Each clinical session will immediately follow the preceding didactic/lab course, keeping with the CoAEMSP Student Minimum Competency (SMC) Matrix progression of learning. These courses progress through diverse hospital, clinic, and prehospital atmospheres to cultivate knowledge, experience, and common sense, ultimately culminating in the Capstone Field internship. The progressive arrangement of clinical and field engagement sessions allows the student to "put it all together" and optimize success.

Clinical Engagement Sessions are outlined as follows:

- **EMSP 325:** Anesthesiology, Emergency Department, Cardiac Cath Lab, Respiratory
- **EMSP 335:** Medical or Surgical ICU, Neuro ICU, Psychiatric Emergency Services
- **EMSP 345:** Trauma Center, Burn ICU, Medical Examiner's Office
- **EMSP 355:** OB/L&D, Pediatrics, Neonatal ICU, EMS Field Experience
- **EMSP 365:** Capstone Field Internship

**\*\*\*note:** *Clinical engagements sessions may change in an attempt to provide the student the best and optimal clinical experience in an effort to provide a well-rounded and grounded paramedic graduate. Therefore, clinical experiences may change based clinical availability and program review. \*\*\**



## Student Affairs

### Program Faculty

Updated faculty lists and contact information are available upon request, on the website and included in course documents. A summary of positions is listed below:

- Dean and VP of Education
- Medical Director
- Program Director
- Instructors
- Adjunct Instructors
- Lab Instructors
- Registrar

### Nondiscrimination

In accordance with the Statement of Equal Opportunity, Grady Health System does not discriminate on the basis of race, color, creed, national or ethnic origin, gender, religion, disability, age, political affiliation or belief, genetic information, disabled veteran, veteran of the Vietnam Era, spouse of military member or citizenship status (except in those special circumstances permitted or mandated by law). Any student with a complaint or grievance should contact the Registrar at 404-616-7414.

### Eligible Applicants

All applicants must be 18 years of age at start of enrollment and successfully pass a background check as well as have a negative drug screening results.

### Program Costs and Fees

Refer to <https://www.grady-ems.org/tuition-fees/> for full description of tuition and fees for attending Grady EMS Education Academy.

### Admissions Process

Admission to a Grady EMS Education Academy is a multi-step process which consists of an assessment for post-secondary readiness of eligible applicants. The ability of a student to succeed in a program is greatly determined by the math and language skills possessed by that student. All students applying for certificate programs must be assessed prior to acceptance to a program of study. Students will then be admitted in accordance with the academic standards applicable to that program.

## Admissions Procedure

### Step #1: APPLY ONLINE <https://www.grady-ems.org/online-application-process>

When Applying for a course please ensure you select the correct program.

Please Note: If you are not a certified EMT you may not apply for Advanced EMT or Paramedic courses. Prior to entering the Paramedic course, the applicant must have a current Georgia/NREMT AEMT licensure/certification with a year of 911 experience.

**Step #2:** Once you submit your application, EMT applicants must schedule a date to take the ATI TEAS entrance exam and score 60% or better to be considered for EMT Program. Students applying for either the Advanced EMT or Paramedic program will take an in-house pre-admissions examination. These exams will assess the students at their current level of certification and a minimum score of 60% is required for admission into either the Advanced EMT or Paramedic program.

**Step #3:** Once the pre-admission entrance exam is complete. Candidates must complete Background and Drug Screening at [www.advantagestudents.com](http://www.advantagestudents.com). Applicants must create an account and select to “Share” your results with Grady Student Education. Request “Student Package” (background check & drug screen). Schedule and complete a drug screening according to the Advantage Students website. We do not accept background checks or drug screens from other agencies.



**Step #4:** Submit Paperwork (listed documents must be submitted together after applicant receives a passing score for the pre-admission exam and drug screen) to Registrar via email or in person before the designated cut-off date:

- Copy of valid driver's license
- Copy of social security card
- Copy of current medical insurance card – else signed waiver is required
- Transcripts (unofficial is acceptable) from the highest level of education completed (GED, High School diploma, college degree or transcripts)
- Grady EMS Physical Examination Form completed by physician
- Completed Immunization Records (Hepatitis B, Varicella (chicken pox), TDAP, and MMR) – IF YOU DO NOT HAVE YOUR IMMUNIZATION RECORDS YOU MUST HAVE BLOOD TITERS DRAWN AT THE HEALTH DEPARTMENT TO CONFIRM IMMUNITY – **NO EXCEPTIONS**
- Current AHA BLS card for Advanced and Paramedic Applicants Only
- EMT or AEMT National Registry Certification and/or Georgia State License card for Advanced and Paramedic Applicants Only

**Step #5:** You will receive an email from the Academy requesting you to register with ACEMAPP (<https://acemapp.org>). There is a fee associated with this (\$50.00) and required for your hospital rotations.

**Step #6:** Pay tuition by in full by prescribed due date.

\*\*\*PLEASE NOTE: Fees are paid in person to Registrar by credit card, debit card, personal check, cashier's check or money order. We do not accept cash payments. Required documents must be submitted prior to payment being accepted by Registrar.\*\*\*

**Step #7:** Students will be required to attend two Orientations prior to the start of class, one at the Hospital and one at the Academy. More information will follow in the month prior to class start date.

**Step #8:** Purchase additional uniform pieces and classroom/clinical equipment (see mandatory uniform).

**Step #9:** Attend class and let the learning begin!

**Please do not call to check on the status of your application.** If you have questions, please email [registrar@grady-ems.org](mailto:registrar@grady-ems.org) regarding the application process, program information, or to schedule a tour.

### **Withdrawal and Refund policy**

Students who withdraw from a course within the **first 10 calendar days** will receive an 80% refund (minus administrative fees). **On the 11th calendar day** from the start of a course, no refunds are available. A student may carry those tuition fees to the next course offering but may be subject to additional tuition if it has changed and or changes in course fees. Some fees have an expiration date and may have to be re-paid. There is no refund for fees paid to a third party vendor and/or fees paid to the academy if the expense has been incurred (example shirts have been purchased). All students who desire to withdraw from a Program must formally submit a document in writing (email is sufficient) that states why s/he wishes to withdraw. See **Evaluations** heading for information about how the withdrawal will appear on transcripts.

### **No-show Policy**

Students who do not attend or begin the course during the first week of a term or do not make the required instructor contact will be reported to the Registrar's Office as a "No Show" and dropped from the class. Once a student is dropped as a "No Show", the student cannot be reinstated in the class. An instructor cannot authorize the reinstatement of the student into the class. Students dropped as "no shows" are not allowed to attend or participate in the class(es), nor can they request an instructor to accept course work. "No shows" are not entitled to a refund and are obligated for full payment of tuition and fees. Federal financial aid recipients reported as a "No Show" may owe a re-payment to the Academy. "No Show" reporting is in compliance with Title IV Federal Legislation.





### **Re-admission Policy**

Students are allowed one re-attempt of the initial education program in which they withdrew or failed to meet standards, and may reapply for the next scheduled cohort. The student may choose to restart the entire program or enter into the cohort at the course at which they withdrew or were unsuccessful.

If the student decides to re-enter the program they will be required to demonstrate knowledge and skills competency by completing and passing a series of psychomotor skills and cognitive tests up to the learning point they withdrew or were dropped. Depending on which program the student was enrolled in, the Program Director or Course Coordinator may require the student to demonstrate: NREMT CPR/AED, backboarding, airway skills check-offs, medical and trauma assessments, medication administration, ECG interpretation, AHA mega-code, or any other "high-stakes" skills/scenario. Students will also be required to pass a cognitive exam based off information and knowledge of their last successful course prior to their departure from their program.

### **Program Competencies**

Core competencies are outlined in each course syllabus. The accumulation of all courses represents program competencies.

### **Competency-Based Courses**

Course syllabi identify those competencies that must be demonstrated by students in order to successfully complete a course. Course syllabi can also identify certain competencies as critical, and may be further described in supplemental course policies. Assessments of a student's competence may be achieved by the following methods: written, oral or practical quizzes, tests and examinations; assigned written or oral projects and classroom, laboratory, and/or clinical observations of student learning activities.

In order for a student to receive credit for a course, the final weighted average of all course assessments must be a minimum of 70 percent. However, failure to demonstrate achievement of any critical competencies will result in a grade of "F." Students who fail to demonstrate achievement of any critical competencies may, if authorized by the instructor, be given an additional assessment opportunity to demonstrate competence. The additional opportunity will be comparable to, but not necessarily identical to, the initial assessment. The maximum grade awarded for the additional assessment will be no higher than 70 percent. Students allowed a re-assessment of competencies, must pay all costs of the re-assessment sessions. A student who fails the final assessment of any critical competencies during a semester may be administratively withdrawn from the course if continued participation is deemed harmful to the student or others.

### **Rights & Responsibilities**

- Students have a right to become informed and to express their opinions in a suitable manner without jeopardizing their relations with their instructor. Faculty and students have a responsibility to not discriminate against any other person because of race, age, sex, creed, national origin, or handicap.
- Students have a right to discuss grievances informally with persons involved before invoking formal grievance action, and a right to a standard procedure for resolution of grievances.
- Students have a right to publish and post information that does not disrupt the orderly operation of the academy as determined by the Social Media Policy.
- Students are expected to respect all persons and the property of others. Students have a responsibility to know and adhere to the Code of Conduct of the institution.

### Student Expectations

- Minimal Expectations of the EMT Program:  
“To prepare competent entry-level Emergency Medical Technician in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.”
- Minimal Expectations of the Advanced EMT Program:  
“To prepare competent entry-level Advanced Emergency Medical Technician in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains, without an exit point at the Emergency Medical Technician level.”
- Minimal Expectations of the Paramedic Program:  
“To prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains, without exit points at the Advanced Emergency Medical Technician or Emergency Medical Technician level.”

### Health Insurance Portability and Accountability Act (HIPAA)

There may be times when discussions involve a clinical experience. Students who share one of these experiences must change as much about the situation as possible to prevent the patient from being easily identified. The Grady EMS Education Academy shall use and disclose patient Personal Health Information (PHI) in accordance with the HIPAA Privacy Rule and other applicable law. Refer to <https://www.hhs.gov/hipaa/index.html> for additional information.

### Family Education Rights and Privacy Act (FERPA)

The Family Education Rights and Privacy Act (FERPA) of 1974, provides protection for student education records. FERPA rights however are not limited to education records relating to the students educational performance. Accordingly, Grady EMS Academy students have a right to privacy when outside sources inquire about them while they are on campus or engaged in classroom instruction. Grady EMS Academy program officials may disclose that a student is enrolled; however, the officials should not disclose a student’s specific whereabouts or class schedule unless the student gives permission to Grady EMS Academy officials. Exceptions will be made for public officials who have a subpoena or a court order. Refer to <https://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html> for additional information.

### Americans with Disabilities Act (ADA)

The Americans with Disabilities Act (ADA) of 1990 has implications that pertain to licensure or certification. The law permits testing that requires the use of sensory, manual or speaking skills where the tests are intended to measure essential functions of the profession. For example, an applicant with reading difficulties is required to take a written exam since the ability to read is an essential function of EMS. Exams are designed at least in part to measure the student’s ability to read. A second example is one where skills proficiency verifications must be performed within established time frames. Performing a skill within established time frames is required because speed of performance is an integral part of patient care. Both the ability to read and the ability to perform skills within time frames are essential functions for an EMS provider. Therefore, in EMS, a person with a disability may not be denied the opportunity to take an examination; but this person shall be required to take a written exam and pass the skills proficiency verifications within established criteria. **According to policy, if the student is requesting consideration for a disability under the ADA, the student must submit documentation confirming and describing the disability for review and consideration at the beginning of the course.**

The following specific points pertain to those involved in EMS training and education programs:

- Students cannot be discriminated against on the basis of a disability in the offering of educational programs or services.
- There can be no accommodation during screening, evaluation or course examinations that will compromise or fundamentally alter the evaluation of skills that are required to function safely and efficiently in the profession.
- Students who have received an accommodation during the course need to fully understand that there is a separate process for requesting an accommodation for the written certification exam and eligibility for an accommodation is determined on a case-by-case basis. Ex: Because a student was allowed an accommodation during the course does not guarantee an accommodation for the National Registry exam.



Certain \_\_\_\_\_ -U o'h \_\_\_\_\_ 7 \_\_\_\_\_ K ) \_\_\_\_\_ u \_\_\_\_\_

**Students are not allowed additional time for skills with specific time frames.**

Patients would suffer due to life threatening conditions in emergency situations if treatment were delayed.

**2. Students are not allowed unlimited time to complete a written exam.**

This request is not considered unreasonable because a candidate should be able to complete a test within a finite amount of time. Students will be allowed a maximum of time and one-half to complete written exams.

**3. Students are not allowed to have written exams given by an oral reader.**

The ability to read and understand small English print is an essential function of the profession, and written exams are designed, at least in part, to measure that ability.

**Students are not provided a written exam with a reading level of less than grade eight.**

The EMS profession requires a reading level of at least grade eight to work safely and efficiently.

**Students must take all exams during the scheduled time, as a member of the enrolled class.**

The ability to utilize knowledge immediately is an essential task for EMS Providers. Exams are given to elicit immediate recall and understanding of emergency situations. When an exam is administered, students will be permitted a space to take the exam. Refer to the written examination policy of missed exams due to excused absences.

**Students must answer all written test questions as written. No explanation of the question can be provided by the test proctor or any other individual.**

Additional descriptions of test questions would not be a reasonable accommodation because reading and understanding written English is an essential part of EMS communication. Student must also be able to understand and converse in medical terms appropriate to the profession. Because of the critical nature of the tasks needed in emergency situations, accommodation requests are considered very carefully, on a case by case basis. The safety and welfare of the community must be insured while providing full protection of the certification applicant's rights. The main question to be considered is: with the accommodation being requested, can this individual perform the essential functions of the job safely and efficiently?

The Functional Job Description available at <http://www.bls.gov/ooh/Healthcare/EMTs-and-paramedics.htm> describes the required skills and job requirements essential to EMS personnel. This description will guide all accommodations permitted for EMT and Paramedic students.

**Students employed by Grady Health System**

Students employed by Grady Health System will be held to the same standard as those who are not. There is only one version of the Student Handbook, Clinical Guide, or any other academic documents regardless of employment status.

Students employed by Grady Health System attending any of the Programs offered by the Grady EMS Education Academy through the Employment Agreement contract may have their tuition waived for **ONE** attempt. If the student withdraws or fails, the student will be financially responsible for their second and final attempt. If a student decides to resign from his/her employment at Grady Health System they may continue in an EMS program but they will be subject to loss of employee benefits as they pertaining to the Program, up to and including remittance of tuition payment pursuant to the contract executed between the student and Grady Health System. By contrast, incidents that occur at the EMS Academy while enrollment in an initial EMS Education Program will not automatically impact an employee's employment status at Grady Health System.

**Course Credit**

Course credit is awarded as described in the Course Description Catalog. Course credit may be awarded by other than satisfactory completion of a course at Grady EMS Academy. Credit may be earned for the following:

- Credit by Transfer
- Secondary Articulation Credit (limited to specific EMS coursework)
- College Level Examination Placement Credit (CLEP) or Non-Collegiate Course Credit
- Military Credit (American Council on Education Evaluation)
- Exemption Exam



### **Transfer Students**

Transfer students are those who wish to transfer to Grady EMS Academy from a tertiary institution. Students applying for admission should be in good standing at a regionally accredited diploma or degree-granting institution. Credit for EMS courses will only be granted if successfully completed at a CoAEMSP accredited institution. The admissions office must be contacted for any exceptions. Transfer students must have official transcripts sent from all colleges attended.

### **Transfer of Credit**

Students may be eligible for transfer credit. A maximum of 40% of Paramedic Program specific course work from another CoAEMSP Accredited institution may be transferred. Students may also transfer the pre-requisite Anatomy and Physiology I courses but this transfer is contingent upon depth of study (as courses in Anatomy and Physiology should be comprehensive) and length of time since the course was successfully completed.

If previously enrolled in a Human Anatomy and Physiology course that was not comprehensive, two courses of Human Anatomy and Physiology may be required to meet eligibility for transfer credit. If previously enrolled in a Human Anatomy and Physiology course more than 5 years prior to the present date, students must demonstrate competency by scoring 80% or better on a course exemption examination. The administrative cost to file for exemption credit by examination is \$150.00. Students may challenge this test only once.

### **Advanced Placement**

Grady EMS Education Academy **does not** provide advanced placement based on experience as other healthcare provider licensures.

### **Experiential Learning Credit**

Grady EMS Education Academy **does not** provide advanced placement for experiential learning.

### **Articulation Agreements**

An articulation agreement allows students from Grady EMS Academy to apply transfer credit to a participating institution for an Associate or Bachelor degree. The EMS Academy currently does not have a formal articulation agreement with any specific college or university. It is up to the education institution whether they will accept EMS Academy courses as college credit. However, some colleges will award exemption credit or block credit for courses and licensure but the student must meet all of the college's requirements. The Program Director or Registrar can provide a list of current colleges accepting Grady EMS Education Academy contact hours as college credit.

### **Change in Name or Address**

Students with changes in address, email, or phone numbers should complete a student change form. Students must present, to the Registrar, photo identification with legal verification of change and one of the following: social security card, marriage license, and divorce decree. Only original documents will be accepted.

### **Transcripts**

Requests for official transcripts must be made to the Office of the Registrar. Grady EMS Education Academy will not release copies of student transcripts without consent from the student. Transcript requests may be made via email and will be mailed or sent electronically for a \$25 fee. Transcripts are processed only after all financial obligations to the college have been satisfied. The Registrar's Office is not responsible for delays caused by postal or courier services.

### **Licensure and Certifications**

Students will maintain either their Georgia EMT/AEMT licensure or National Registry EMT/Advanced EMT certification, and AHA BLS/CPR for The Healthcare Provider certification throughout the paramedic program. The student must immediately notify the Program of the expiration and the student will be suspended from ALL clinical or field internship activity and may be removed from the program. Students without the aforementioned licensure or certifications will not be eligible to take the National Registry certification examination.



### Uniform Dress Code

- Student uniforms will be neat and clean.
- Student ID badge must be worn above the waist at all times.
- Students are required to wear assigned uniform polo styled shirts during class and at clinical.
- Pants will be black and must wear a plain black belt.
- Undershirts will be white or black.
- Sleeves may not be rolled up and no blousing of pants.
- Socks will be white or black.
- Boots or shoes will be black and of sturdy construction with adequate traction and safety toes are recommended.
- Jackets or other outerwear must be approved by the instructor.
- No jewelry (ear rings, nose rings, necklace, etc.).
- No scents (e.g. cologne, perfume).
- No visibly offensive tattoos.
- Hair longer than shoulder length must be pulled back and secured.
- Beards will be neatly groomed and no longer than ¼ inch.
- Beards are not allowed during any field internship or clinical.
- During clinical, the Program complies with the specific clinical site policies and may differ by locations. The student is responsible for following those guidelines or will be removed from the clinical site.
- When the student is on the roadway, they are required to wear the reflective vest or other high visibility clothing meeting current NHTSA/ANSI standards.
- During severe weather (e.g., winter storms, extremely wet conditions) the student may exercise good judgment and wear additional clothing appropriate for conditions.
- All items are subject to approval by the clinical/internship site and/or Program Director(s).

### Hours of Wear

Students will remain in standard uniform throughout the entirety of clinical or internship time. Students must remember they are guests of the clinical/internship site and students must be distinguishable from employees. Attire at all times is a reflection upon you and the Program. Students may not wear program clinical/internship attire outside of clinical/internship activities unless traveling to or from clinical/internship sites. As a representative of the above, any unfavorable attention caused by your attire or behavior will be addressed as unprofessional conduct and behavior and may be grounds for dismissal from the program(s). Students will not possess, purchase, transport or consume alcoholic beverages while in clinical uniform. If a clinical site requires scrubs, the student will arrive and depart in the Program uniform. **No other EMS or other agency/institution logos are not authorized on any part of The Grady EMS Academy clinical uniform.**

### Clinical/Internship Experiences

Program students are expected to be enthusiastic and professional in appearance and behavior at all times. Patient confidentiality will be adhered to at all times. Students will be punctual, clean and neat in appearance, and perform all activities with the utmost professionalism. Students failing to meet these standards will be dismissed from the learning site immediately.

Clinical and internship experiences are extremely demanding. Students will experience a vast diversity of sites and patient populations. Clinical experiences require students to travel to assigned clinical sites within Greater Atlanta (other clinical/internship sites may be arranged with your Program Director). Clinical sites will be distributed as equally as possible. Clinical experiences are not only designed to provide the best patient care opportunities for students, but allow the student to learn about the operations of hospitals and EMS systems. Pre-hospital clinical experiences may be spent with 911 or Critical Care transport teams. Requirements will be outlined further in the Grady EMS Academy Clinical manual. Students are expected to assist all clinical/internship staff during their clinical/internship time; however, at no time is a student to be substituted as a member of staff any clinical, field, or internship experience. Students will contact their instructor staff if they have any questions/concerns while at a clinical shift.



### **Incident Reports**

If a student encounters any of the following events, the student and preceptor will immediately notify the Clinical Manager, Instructor, or Program Director. If they are unable to contact program staff, contact the Grady EMS Operations Supervisor 404-616-6395 or 404-489-1215. The student and/or preceptor may be required to complete an Incident Report following any unusual event or circumstance. Examples of such events include, but are not limited to:

- Performance of an unusual procedure
- A potential medical or legal situation
- Vehicle accident with or without injuries involving the student
- Crime scene
- Involvement in news-worthy event
- Medication or procedural error
- Response to complaint investigation
- Patient or family conduct
- Deviation from State Scope of Practice (SSP)
- Exposure (TB or Meningitis)
- Needle stick
- Assault or Battery upon student, preceptor, patient or others involved in patient care or the incident
- Incidents of physical, sexual, emotional abuse or neglect
- Media contact or requests from anyone representing the legal profession.

All Incident Reports must be submitted at the conclusion of clinical or field internship shift and contain a run number, date of incident, names of personnel involved, and explanation of incident.

### **Academic Honesty**

Students will conduct themselves at all times in accordance with The Grady EMS Academy Academic Honesty policy. Violation of the Academic Honesty Policy may result in dismissal from the program. Acts of academic dishonesty include (but are not limited to) tampering with grades, obtaining or distributing any test, quiz, paper, assessment tool, research, or project. Acts of academic dishonesty may be either those of commission or omission. Acts of academic dishonesty in the clinical setting may include (but not limited to) fabricating, modifying or diverting attendance records, preceptor evaluations, or patient care reports.

### **Digital Courtesy**

All electronic devices should be placed on silent during class. This includes cell phones, radios, pagers, laptops, and similar devices. Students will not answer calls, texts, or email during class, lecture or skills. Electronic devices listed above may only be used during breaks. The instructor may grant exceptions to this policy in certain cases such as topic research during class.

Students are required to check their email regularly. The Program faculty and staff will use email as the primary mode of communicating. Course hour changes, cancellations, and specific instances of curriculum changes will be communicated via email.

### **Classroom Participation**

Teamwork is essential to successful patient care; thus, class participation is required. Students are expected to successfully perform various team roles in a variety of patient care scenarios. Students are evaluated on both their leadership ability and their participation as a team member, success in both areas is vital to success in pre-hospital medicine. Students will be formed into teams by the instructor.

### **Attendance Policies**

Absence is defined as not attending any class or clinical regardless of the reason. Students may not exceed 10% of an individual course or 10% of total program time. Classes designated as mandatory attendance must be attended in entirety (example ACLS, PHTLS) and may only be obtained from the Program. No outside certifications will be accepted as substitutes for mandatory classes. In the case of any illness which causes the student to miss two or more classes, the student may be required to have their treating physician complete the Fitness for Duty Form prior to returning to class.



Absence from more than one clinical day may result in dismissal from the clinical site or the program. Students who fail to attend two or more scheduled clinical/internships without being excused by the Program Director or designee will be dismissed from the program. Students who cancel more than one (1) scheduled clinical/internships with less than a 24-hour notice are subject to the progressive disciplinary policy.

**Tardiness** is defined as not being at the designated place at the designated time. Being on the grounds of a location is not considered the designated place. Students must be at the clinical site and designated location on the site to be considered on time. One minute late is considered tardy.

Participants are expected to take responsibility for getting class notes, handouts, and make-up assignments when necessary. The Instructor is NOT responsible for supplying the student with these items. When a student misses an assessment (quiz, exam, lab), the instructor will determine the process for a make-up evaluation and must be completed within the time-frame not to exceed 7 days.

### **Reading Assignments**

Lectures are based on the US DOT National Standard Curriculum and may vary in sequence from the textbook. The material presented in lectures, textbooks, and assigned readings will be utilized in preparing the mid-term (formative) and final examinations (summative).

Instructor faculty may provide students reading assignment. The instructor reserves the right to conduct periodic unannounced quizzes to evaluate student reading comprehension.

Supplemental reading material may be assigned and students are expected to know the content.

### **Evaluations**

Written examinations are the most appropriate and effective process for measurement and assessment of the students' success in converting content into knowledge. Practical skills provide feedback to both the instructor and student on the ability of the student to perform specific tasks. Results of written and practical skills and observational reports detailing participants' attendance and participation will be considered on the final grade. Formative evaluations (tests) will be given for each course. Students obtain a minimum of 70% on all formative evaluations. If the student receives a grade <70% on any examination, the student must retake the exam, obtaining a grade of at least 70%. Regardless of retest score, the student will receive a 70% for the exam. The student will only be given one opportunity for a retest.

A final examination (summative), which is comprehensive in design, is given at the end of each course. Students must obtain at least a 70% on the final examination (summative). To successfully complete the course, the student must achieve an overall average of 70%. The students must achieve a satisfactory grade on all psychomotor (lab) competencies. Students must maintain current AHA BCLS and Georgia EMT licensure (if applicable).

### **Grading**

A = 90% and higher

B = 89.99-80%

C = 79.99-70%

F = <70%

Successful completion of any certification required courses (such as ACLS, BLS, PHTLS) may be required to successfully complete a course. Student assessment may be achieved through quiz(s), mid-term comprehensive evaluation (formative), final comprehensive evaluation (summative), and direct observation of competencies. The EMS Academy will only issue a 'W' or withdrawal grade on an official transcript if the student is in good academic standing and provides the academy notification of the withdrawal. A 'W' will not be issued if the student leaves the program or course with a current grade less than 70% or has failed to complete competencies. If a student leaves without notification or does not meet the above criteria, an 'F' will be assigned as the grade. The EMS Academy does not award 'Incomplete' or 'I' grades. Students who achieve a final average of greater than 70% and are able to demonstrate mastery of all competencies are eligible to graduate from their respective program and shall thereby be eligible to challenge the National Registry Examinations for Certification.





### **Student Drug and Alcohol Testing**

Grady Health System and the EMS Academy maintain a drug free workplace/education environment. It is unlawful to manufacture, distribute, have or use controlled substances at Grady Health System or any affiliate site where Grady Health System is represented. Students may not have illegal or non-prescribed controlled substances on EMS Academy property or at affiliate clinical site premises. It is prohibited for a student to report to class, lab, clinical, or any course/class function while intoxicated or in an otherwise impaired condition. If there is a reasonable suspicion that a student is impaired based upon physical appearance, demeanor, abnormal or erratic behavior or evidence that a student has used, possessed, sold, solicited or stolen illegal or controlled substances, the EMS Academy may ask the student to voluntarily submit to an alcohol or drug screen. Refusal to submit to a test is grounds for immediate dismissal from the Program.

If a preceptor, program faculty, clinical site, student, etc. suspects a student meets the aforementioned criteria, s/he will immediately notify a member of the EMS Academy Faculty. A member of the EMS Academy Faculty or designee will arrive to the location and verify the findings. Every attempt will be made to obtain written statements from any witnesses or request such statements from the clinical site designee.

The EMS Academy Faculty or designee will escort the student to the lab to submit to the test. The EMS Academy Faculty or designee will then arrange transportation to the student's residence. EMS Academy Faculty or designee will retain the student ID and access cards etc. until the investigation is concluded. While the investigation is ongoing, the student is not permitted to participate in any course activities and not permitted on the EMS Academy campus or any clinical site location.

### **Participant Health and Safety**

Good mental and physical health is necessary for an individual to maintain the pace and physical demands of this course. All course activities are supervised by the faculty. Any student concerns or problems regarding their safety should immediately be reported to the faculty. Lab and practical work can result in injury if performed incorrectly, therefore, directions given by faculty should be followed and questions asked by the student to clarify any misunderstandings.

All students will perform with regard for personal, student, or patient safety. At no time will anyone perform any act that is deemed unsafe or inappropriate. Any student who has a potential communicable or infectious disease should not participate in lab, clinical, or any contact activities. Any student with a health problem, injury, or condition that may be exacerbated by participation in class/lab/clinical activities may be required to have their treating physician complete the Grady EMS Academy Fitness for Duty Form.

All students will exercise prudent physical exertion during all phases of the program. Any time a student suffers an injury, illness, accident, or medical emergency they will immediately report the occurrence to the faculty or preceptor. A written incident report will be filed with the program within 24 hours. The Academy is not responsible and will not pay for doctor, hospital, or ambulance bills incurred as a result of accidents or medical emergencies of students. It is required students maintain health insurance during the program. If you have questions about acquiring medical insurance, please visit [www.healthcare.gov](http://www.healthcare.gov).

### **Grounds for Dismissal**

- Violations of HIPPA
- Under the influence of alcohol or drugs at any lab, classroom, clinical, or internship
- Failure of a random, scheduled, or reasonable suspicion drug or alcohol test or refusal to submit to testing
- Attempting or self-scheduling clinical or field internship when not scheduled
- Removal or theft of any property of the school, hospitals, clinical site, student, or patient
- Fraudulent documentation of clinical hours, skills, etc...
- Classroom lab skills or competencies not completed by the agreed upon date or remediation plan
- Noncompliance with attendance and grading policy
- Failure to maintain appropriate certification and/or licensure
- Cheating or deliberate documentation errors or forging of any document.





- If any clinical site refuses to allow a student to attend or continue
- Repeated problems with Affect without resolution after remediation or progressive discipline
- Recording classroom or laboratory activities must be approved by the Program
- Any audio or video recording of clinical or field internship activities
- Failure to complete any course required paperwork
- Failure to observe any government issued stipulations on your licensure, to include scope of practice
- Behavior or attitude that calls unfavorable attention to your or The Grady EMS Education Academy
- Failure to maintain a "C" grade
- Failure after remediation of any psychomotor skill or competency

## Grievance Policy

### ***What if I disagree with the grade I received in a course or some other aspect of the program?***

A student who disagrees with a final grade, or has complaints about the program, curriculum, policies, procedures, faculty or other aspects of the program must communicate in writing to the Course Instructor, Program Manager, Program Director, or Academy Dean. If a complaint is filed, the student will be encouraged to discuss the situation with those involved in a faculty-mediated setting. If this process does not resolve the problem, an alternate plan will be established with the student and Program. Final resolution rests with the Dean.

### ***How do I appeal a dismissal from the Program?***

A student must submit a written appeal to the Program Director with five (5) business days. This letter should explain why the student feels they should be given an exception to the policy based on extenuating circumstances, and changes the student will implement to ensure their success. The Program Director will notify the student of the decision within five (5) business days of receipt. Students who disagree with the Program Director's decision may continue the appeal process to the Academy Dean. This written appeal must be submitted to the Dean within five (5) business days of the Program Director's decision. The Dean's decision is final.

## Program Evaluation

Constructive criticism concerning Programs at Grady EMS Academy is welcomed and integral to the continued success and improvement of the programs. Student feedback is an important and necessary part. Student can submit constructive criticism (including suggestions for inclusion and removal as well as correction) in written form to the course instructor or Program Director at any time. Student will be given an anonymous opportunity at the conclusion of each course of evaluate the instructor. CoAEMSP requires the program to annually offer students the opportunity to provide feedback. We value your comments and observations as they will improve and strengthen the program!

## Frequently Asked Questions

### ***What are EMS courses like?***

Pre-hospital medicine theory courses consist of lectures, discussions, seminars, case studies and other types of teaching and learning activities designed to assist students in obtaining the knowledge needed to safely care for others. Specific learning activities and grading criteria are identified in course syllabi and class outlines. EMS skills courses consist of activities designed to assist students in developing competency in the performance of basic and advanced life support skills.

### ***How will I know how I am doing in the program(s)?***

Throughout the program, students are evaluated to determine whether certain objectives have been met. These objectives are based on National Practice Analysis and Standards of Practice set forth by the Georgia Department of Public Health and on graduate competencies outlined by The National Paramedic Curriculum. Students are required to meet the objectives in theory, skills, and clinical courses. Students who fail to meet grading standards cannot continue to progress in the program.



Students are expected to meet with their instructor(s) periodically to monitor their progress in the program. Instructors will provide guidance and support students in meeting the objectives. Students should ask questions and seek help from faculty. Students who experience difficulty in meeting the objectives for a didactic or clinical course will be issued a written remediation plan, when appropriate, by their clinical instructor or designee.

A remediation plan outlines the learning objective(s) the student is not meeting, the behaviors that the student is expected to demonstrate, makes recommendations of actions that may assist the student in meeting course objectives, places a time frame for review of student progress and outlines the consequences of failing the remediation plan.

Students who attend clinical/internship sites unprepared to provide safe patient care will be dismissed from the clinical practice site and expected to develop a remediation plan in collaboration with their instructor. Students whose actions significantly endanger patient safety, violate guidelines of conduct may be dismissed from the course, program and/or institution immediately, with or without prior remediation.

It is the responsibility of students to be knowledgeable about their grades and clinical performance by keeping records of their test scores and seeking feedback from the instructors and accurately entering information into FISDAP. Students are encouraged to use faculty, counseling services, study skills, and support services as needed to assess their progress and assist in achieving success in the program.

***Are there any graduation requirements I should be aware of?***

To be eligible for graduation, all clinical, internship, research, and other previously assigned assignments MUST be complete to the Program Director's satisfaction. An audit of clinical, internship, and psychomotor records will be completed after each course and at the end of the Program. All students require a Terminal Competency Form signed by the Program Director and Medical Director. Students must receive a Terminal Competency Form or are NOT eligible to test the NREMT. The Program requires Paramedics to achieve a passing score during their final Medical Review Panel. All assessed tuition and fees must be paid prior to graduation.

***What are the requirements for licensure?***

Graduates of the program must be licensed and affiliated in order to practice in their particular state. Licensure is a governmental function and it is your responsibility to make application in the state in which you intend to seek employment. You cannot function as a pre-hospital provider in any state without being licensed by that state. More information on Georgia requirements can be found at [www.dph.georgia.gov/EMS/ems-licensure](http://www.dph.georgia.gov/EMS/ems-licensure)

At the conclusion of your program, you will undertake the two-part National Registry of EMTs (NREMT) certification exam. The exam is composed of a practical exam in which you demonstrate competent performance of pre-hospital skills within your scope of practice, and a computer based test which measures your cognitive knowledge (thinking, understanding, and remembering). NREMT certification is NOT licensure, but NREMT certification is accepted in nearly every state as the means to become licensed. More information on the NREMT can be found at [www.nremt.org](http://www.nremt.org)

If you have any questions or concerns regarding the content, please contact the Registrar or see <https://www.grady-ems.org/faqs/> for more frequently asked questions.

**Disclaimer**

**The Program Director, Faculty and Instructors maintain the right to revise, amend, alter or curtail any aspect of any or all Program(s).**

## STATEMENT OF UNDERSTANDING

I have received, read, and had an opportunity to have any questions or concerns clarified regarding the information contained within this document.

By affixing my signature below, I agree to abide by the policies and behaviors as outlined within this document, and further, I understand the Academy's policies regarding licensure, suspension, dismissal and evaluation of my professional behaviors, academic performance and clinical competencies.

\_\_\_\_\_  
(Student signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Print Student's Name)

NOTE: This form must be signed and returned to the program director for insertion into student file and retained for the length of program enrollment.

\_\_\_\_\_  
(Admissions/Registrar Representative-Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Admissions/Registrar Representative-Print)