

NRPM 111L: Maternal and Child Emergency Care Lab Syllabus

[Semester and year]



Instructor information

Instructor	Email Address	Office hours
Paula Johnson	Paula.johnson@princetonrescue.com	Vary

General information

Description

This laboratory course provides participants with practical application of the skills associated in a treatment/disposition plan for gynecological, obstetrical, neonatal, and pediatric emergencies. *Co-Requisite: NRPM 111, NRPM 113*

Expectations and goals

Upon Successful completion of this course, students will be able to:

- Successfully perform the following skills without critical error:
 - a. Direct Orotracheal Intubation (Ped)
 - b. Normal Delivery with Newborn Care - PPCP
 - c. Abnormal Delivery with Newborn Care - PPCP
- Describe the anatomic structures and physiology of the reproductive system during pregnancy.
- Identify the stages of labor and the EMT-Paramedic's role in each stage.
- Formulate an appropriate treatment plan for providing initial care to a newborn.
- Describe the epidemiology, including the incidence, morbidity/mortality, risk factors and prevention strategies, pathophysiology, assessment findings, and management for the following obstetrical, neonatal, and pediatric emergencies.
- Explain the general approach, patient assessment differentials, and management priorities for patients with various types of emergencies that may be experienced in prehospital care

Course Delivery Method: In-Seat

Course materials

Required materials

Computer with Internet capabilities to access:

- <https://CourseSites.com>
- <https://www.platinumplanner.com/>

Optional materials

Required text

- Nancy Caroline's Emergency Care in the Streets; 8th edition, 2013 by Elling and Smith; Publisher Jones and Bartlett. ISBN: 978-1-284-13718-7

Course schedule (**Weeks correspond to semester schedule*)

Week	Topic	Class Session
4	Pediatrics	Rote Skill Lab: • Pediatric ET Peer Review Skill Lab; • Pediatric ET
5	• Obstetrics • Neonatology	Rote Skill Lab: • Normal/abnormal Delivery with Newborn care Peer Review Skill Lab: • Normal/Abnormal Delivery with newborn care
6	• OB/GYN • Neonatology • Pediatrics	Scenario Integration Lab: • OB/GYN • Comprehensive Ped Assess.

Procedures for Evaluation

- A. *Students must complete each NRPM course with a grade point average of at least 70%. Any student who does not have a 70% average at the completion of an NRPM course will not be allowed to continue in the program. The student's academic standing will be discussed with the student periodically throughout the program.
- B. If a student scores below a 70% on a NRPM Cumulative examination, the student will be required to retake the examination until a score of 70% is attained; however, the original score will stand as the recorded score.
- C. Individual skills that comprise a skill lab are mandatory per the National Registry of EMT's. A student must complete each skill with the minimum points required AND the established number of SUCCESSFUL attempts meeting those minimum point standards. A percentage grade will be issued to the student based on the points obtained per attempt, active participation in lab sessions and the accuracy of his/her platinum documentation.
- D. Late submission of platinum documentation will receive a 10-point deduction in grade for each class day in which it wasn't handed in.

***NOTE:** NRPM 202 is the exception to this policy. In this course, you must successfully complete each sub-specialty based on the criteria from each governing agency. The final grade issued for this course will be a "pass/fail." If the student is unable to receive a passing grade for this class, the student will NOT be allowed to continue in the Paramedic Program.

Grading Components and Weights:

The Paramedic Program Student’s Classroom Assessment grade will be the sum of the weighted scores comprising the parameters of course work outlined below.

Skill Lab
Skill Lab: Pass/Fail <i>(minimum points required per skill mandated based on NREMT - PPCP criteria)</i> <ul style="list-style-type: none"> • Platinum Documentation = 20% • Success Pts/Min Req. Pts = 20% • Instructor Review Skill = 40%
20% Monthly Behavioral Evaluation

Items required for skill labs	Minimum Points Required	Total Items required in Peer Review	Total Instructor Review
Direct Orotrachial Intubation Pediatric - PPCP	40	9	1
Normal Delivery with Newborn Care - PPCP	70	3	
Abnormal Delivery with Newborn Care - PPCP	74		1
Comprehensive Patient Assessment (Pediatric) - PPCP	136-146	1	1

Grading Scale:

100-90 = A 89-80 = B 79-70 = C 69-60 = D <59 = F

All students must maintain a C average in each course to continue throughout the program

Attendance Policy

All material is important to your success; therefore, students absent more than 5% of the course without a valid excuse will be dismissed from the program of study.

There are two types of absences recognized as a “valid excuse” by Princeton Rescue Squad’s Education Department: (1) absence resulting from participation in an activity where you are officially representing the Education Department; and (2) absence caused by unforeseeable and unavoidable circumstance which is beyond your control. All other absences are considered willful and will not count as excused. It is your responsibility to provide your instructor with a proper explanation and documentation of these valid absences. It is the responsibility of the student to make up any work or testing missed. The missed (comparable) coursework and exams must be completed within 72 hours of the absence and prior to the last date of the class.

Online Video course Lectures associated with “Hybrid” classes are required to be completed by 10am on the morning of the deadline listed. These deadlines are typically due weekly and attendance will be taken based on your submission of these Lectures. If you fail to submit the Lecture when due, you will be marked absent for that week’s hybrid class.

Tardiness will not be tolerated. Any student who shows up later than 15 minutes into the beginning of a course or leaving a class session 30 minutes or more before the end of the class day will result in the mark of tardy on his/her record. An accumulation of 5 tardies will result in an unexcused absence.

Students may withdraw from the course at any time. Any student that misses more than two (2) consecutive class sessions without contacting the course instructor will be considered to have withdrawn from the course.

Student Advisory and Evaluation

Faculty will routinely discuss student progress throughout the program of study at regular intervals (increments no longer than 25% of the program) to provide learners with adequate chances to take corrective actions. During these mandatory meetings with a student item(s) or subject(s) of concern to discuss may include, but are not limited to:

Excessive absences and tardiness, failure to turn in assignments / clinical rotations on time, classroom / clinical behavior concerns, plagiarism, cheating, struggling or failure to maintain a GPA of 70%, etc.

A Student Advisory Form will be filled out and signed by both the Faculty member addressing the concern, and the student. Once the concern has been documented, the Program Instructor and student will discuss possible resolutions to the problem and a proposed action plan will be written on the Advisory Form. The student may use the Advisory Form to record a rebuttal against the initial concern or proposed action plan. The instructor will then mark the form “unresolved” and forward it to the Education Director who investigate the matter and make a determination on a second Advisory Form. Copies of these completed Advisory Forms are available to the student; however, originals must and will be retained by the Education Program.

Standards of Conduct Regarding Cell Phone Use

As adults, you are permitted to retain your cellular devices unless during testing. At that time, all cell phones must be placed in a bag away from your testing area or given to your instructor until the testing is complete. It is common during lecture for students to utilize their cell phones to look up information regarding topics discussed in the class session, and this practice is permitted. However, if the instructor or other member of the instructional or administrative staff see that cell phones are being used for other purposes (ie: facebook, messenger, etc.) during lecture, lab, or any other designated course activity then the following discipline policy will take place:

- First offense - verbal warning
- Second offense - written warning
- Third offense - dismissal from the program

Academic Dishonesty

As a student and pre-hospital professional, you are expected to adhere to a professional code of conduct and not engage in plagiarism, cheating, falsifying information or records, or any other such activity. Failure to adhere to this code of conduct will result in disciplinary action up to and including dismissal from the program.

Grounds For Dismissal

A student may be dismissed from the program for the following reasons:

1. Absenteeism greater than 1 unexcused class.
2. Receiving a “D” or “F” as a cumulative grade for the course.
3. Insubordination (in class, lab, or in clinical)
4. The conviction and/or known use of, distribution of, or possession of illegal drugs, or controlled substances.

5. Failure to accomplish clinical assignments and objectives
6. Unprofessional or unethical conduct
7. Cheating in related or professional EMS courses or in clinical documentation.

NRPM 111L Course Objectives:

1. Demonstrate how to assess a patient with a gynecological complaint.
 2. Demonstrate how to provide care for a patient with:
 - a. Excessive vaginal bleeding
 - b. Abdominal pain
 - c. Sexual assault
 3. Demonstrate how to assess an obstetric patient.
 4. Demonstrate how to prepare the obstetric patient for delivery.
 5. Demonstrate how to assist in the normal cephalic delivery of the fetus.
 6. Demonstrate how to deliver the placenta.
 7. Demonstrate how to provide post-delivery care of the mother.
 8. Demonstrate how to assist with abnormal deliveries.
 9. Demonstrate how to care for the mother with delivery complications.
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1. Demonstrate preparation of a newborn resuscitation area.
 2. Demonstrate appropriate assessment technique for examining a newborn.
 3. Demonstrate appropriate assisted ventilations for a newborn.
 4. Demonstrate appropriate endotracheal intubation technique for a newborn.
 5. Demonstrate appropriate meconium aspiration suctioning technique for a newborn.
 6. Demonstrate appropriate insertion of an orogastric tube.
 7. Demonstrate needle chest decompression for a newborn or neonate.
 8. Demonstrate appropriate chest compression and ventilation technique for a newborn.
 9. Demonstrate appropriate techniques to improve or eliminate endotracheal intubation complications.
 10. Demonstrate vascular access cannulation techniques for a newborn.
 11. Demonstrate the initial steps in resuscitation of a newborn.
 12. Demonstrate blow-by oxygen delivery for a newborn.
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1. Demonstrate the appropriate approach for treating infants and children.
 2. Demonstrate appropriate intervention techniques with families of acutely ill or injured infants and children.
 3. Demonstrate an appropriate assessment for different developmental age groups.
 4. Demonstrate an appropriate technique for measuring pediatric vital signs.
 5. Demonstrate the use of a length-based resuscitation device for determining equipment sizes, drug doses and other pertinent information for a pediatric patient.
 6. Demonstrate the appropriate approach for treating infants and children with respiratory distress, failure, and arrest.
 7. Demonstrate proper technique for administering blow-by oxygen to infants and children.
 8. Demonstrate the proper utilization of a pediatric non-rebreather oxygen mask.
 9. Demonstrate proper technique for suctioning of infants and children.
 10. Demonstrate appropriate use of airway adjuncts with infants and children.
 11. Demonstrate appropriate use of ventilation devices for infants and children.
 12. Demonstrate endotracheal intubation procedures in infants and children.
 13. Demonstrate appropriate treatment/ management of intubation complications for infants and children.
 14. Demonstrate appropriate needle cricothyroidotomy in infants and children.
 15. Demonstrate proper placement of a gastric tube in infants and children.
 16. Demonstrate an appropriate technique for insertion of peripheral intravenous catheters for infants and children.
 17. Demonstrate an appropriate technique for administration of intramuscular, inhalation, subcutaneous, rectal, endotracheal and oral medication for infants and children.
 18. Demonstrate an appropriate technique for insertion of an intraosseous line for infants and children.
 19. Demonstrate appropriate interventions for infants and children with a partially obstructed airway.
 20. Demonstrate age appropriate basic airway clearing maneuvers for infants and children with a completely obstructed airway.

21. Demonstrate proper technique for direct laryngoscopy and foreign body retrieval in infants and children with a completely obstructed airway.
 22. Demonstrate appropriate airway and breathing control maneuvers for infant and child trauma patients.
 23. Demonstrate appropriate treatment of infants and children requiring advanced airway and breathing control.
 24. Demonstrate appropriate immobilization techniques for infant and child trauma patients.
 25. Demonstrate treatment of infants and children with head injuries.
 26. Demonstrate appropriate treatment of infants and children with chest injuries.
 27. Demonstrate appropriate treatment of infants and children with abdominal injuries.
 28. Demonstrate appropriate treatment of infants and children with extremity injuries.
 29. Demonstrate appropriate treatment of infants and children with burns.
 30. Demonstrate appropriate parent/ caregiver interviewing techniques for infant and child death situations.
 31. Demonstrate proper infant CPR.
 32. Demonstrate proper child CPR.
 33. Demonstrate proper techniques for performing infant and child defibrillation and synchronized cardioversion.
1. Demonstrate the ability to assess a geriatric patient.
 2. Demonstrate the ability to adjust their assessment to a geriatric patient.
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1. Demonstrate the ability to assess a spouse, elder or child abused patient.
 2. Demonstrate the ability to assess a sexually assaulted patient.
1. Observe for an infected or otherwise complicated venous access point.
 2. Demonstrate proper tracheotomy care.
 3. Demonstrate the insertion of a new inner cannula and/ or the use of an endotracheal tube to temporarily maintain an airway in a tracheostomy patient.
 4. Demonstrate proper technique for drawing blood from a central venous line.
 5. Demonstrate the method of accessing vascular access devices found in the home health care setting.

Overview of Semester 2 Class Schedule:

	NRPM 108	NRPM 109	NRPM 111	NRPM 111L	NRPM 110	NRPM 112	NRPM 113	Total hrs/day
WEEK #								
1	3		5					8
2		2	5		1			8
3		2	5		1			8
4		2		5	1			8
5				5			3	8
6				5			3	8
7	5						3.5	8.5
8	5						3.5	8.5
9	5				1		2.5	8.5
10	5				1		2.5	8.5
11		6			1		1.5	8.5
12		6			1		1.5	8.5
13		6			1		1.5	8.5
14					1		7.5	8.5
15					1		7.5	8.5
16							8.5	8.5
17						4	4.5	8.5
18						4	4.5	8.5
	23	24	15	15	10	8	55	150

Course Legend:	Req. Hrs:	Classes will meet on Tuesdays	
		Start Time	End Time
NRPM 108: Basic ECG Interpretation and Cardiopulmonary Emergency Care	23	900	~1400
NRPM 109: Advanced ECG Interpretation & Cardiopulmonary Emergency Care	24	900	~1500
NRPM 111: Maternal and Child Emergency Care	15	~1300	~1800
NRPM 111L: Maternal and Child Emergency Care Lab	15	~1300	~1800
NRPM 110: Medical Emergency Pre-Hospital Care	10	~1500	~1600
NRPM 112: Special Considerations in Pre-Hospital Care	8	900	1300
*NRPM 113: Simulation Lab 1	55	~1300	1830
**NRPM 114: Clinical Practicum 1	72	Based on student avail.	
	222		