Emergency Services Training Institute

Nowhere else can you find more comprehensive firefighter training and emergency services instruction than with the Texas A&M Engineering Extension Service (TEEX). Whether at the renowned Brayton Fire Training Field in College Station, Texas, or at customer-specified locations worldwide, TEEX offers high-quality emergency response training and instruction in more than 130 specialty areas.

TEEX has been providing unsurpassed fire training for emergency responders since 1929, when the State Firemen’s and Fire Marshals’ Association of Texas selected Texas A&M University as the site for a permanent firefighter training school. Today, TEEX trains more than 81,000 emergency responders from all 50 states and 45 countries each year.

Major Programs

- Fire Fighting—Municipal, Volunteer, Marine, and Industrial
- All Hazard Planning and Exercises
- ARFF Training
- Department of Defense
- DHS-FEMA Homeland Security Training
- Driving Simulator Program
- Emergency Medical Services
- Fire Instructor
- Fire Investigator
- Firefighter Recruit Academy
- HazMat Emergency Response Training
- ICS Training and Exercises
- International Emergency Response Training
- Leadership Development
- LNG Emergency Response
- NFA/Extension/Area Schools
- Oil Spill Response Training
- Rescue Training
- Simulation Driven Jurisdictional Crisis Management Training
- Texas Annual Fire Training Schools
- Texas Fire Officer

State of the Art Facilities

Brayton Fire Training Field is one of the largest live-fueled training facilities in the world. The 280-acre site is home to 132 specific training stations, including 22 fueled, live-fire props.

Certification Courses

A variety of courses we offer can lead to certification by the National Board on Fire Service Professional Qualifications (Pro Board) and/or college credit. Several of our courses have also been reviewed by the American Council on Education (ACE); students completing these courses may be eligible to earn college credit at participating colleges and universities.

TEEX

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Emergency Medical Services (EMS) Program

Program Goal
The goal of the EMS Program is to prepare competent entry-level paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.

Career Opportunities
The EMS professions include four levels: Emergency Medical Responder (EMR), Emergency Medical Technician (EMT), Advanced Emergency Medical Technician (AEMT), and paramedic.

The Emergency Medical Responder (EMR) initiates immediate life-saving care to critical patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide life-saving interventions while awaiting additional EMS response and to assist higher level personnel at the scene and during transport. EMRs function as part of a comprehensive EMS response under medical oversight. EMRs perform basic interventions with minimal equipment.

The Emergency Medical Technician (EMT) provides basic emergency medical care and transportation for critical and emergent patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide patient basic care and transportation. EMTs function as part of a comprehensive EMS response under medical oversight. EMTs perform interventions with the basic equipment typically found on an ambulance. The EMT is a link from the scene to the emergency health care system.

The Advanced Emergency Medical Technician (AEMT) provides basic and limited advanced emergency medical care and transportation for critical and emergent patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide patient care and transportation. AEMTs function as part of a comprehensive EMS response under medical oversight. AEMTs perform interventions with the basic and advanced equipment typically found on an ambulance. The AEMT is a link from the scene to the emergency health care system.

The paramedic provides the most extensive prehospital care. Through performance of assessments and providing medical care, a paramedic’s goal is to prevent and reduce mortality and morbidity due to illness and injury. Paramedics primarily provide care to emergency patients in an Out-of-Hospital (OOH) setting. In addition to carrying out the procedures already described, paramedics may administer medications, interpret electrocardiograms (ECG), perform Endotracheal (ET) intubations, and use monitors and other complex equipment.

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 paramedic include public education, health promotion, and participation in injury and illness prevention programs. As the scope of service...
continues to expand, the paramedic will function as a facilitator of access to care, as well as an initial treatment provider.

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

The Texas A&M Engineering Extension Service (TEEX) EMS Program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

**Commission on Accreditation of Allied Health Education Programs (CAAHEP)**

25400 U.S. Highway 19 North, Suite 158  
Clearwater, FL 33763  
727-210-2350  
https://www.caahep.org/

**Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP)**

8301 Lakeview Parkway, Suite 111-312  
Rowlett, TX 75088  
214-703-8445  
Fax: 214-703-8992  
https://coaemsp.org/

Students completing all certificate course requirements are eligible to apply for certification, by examination, from the National Registry of Emergency Medical Technicians (the National Registry), which is necessary to apply for certification or licensure from the Texas Department of State Health Services (TxDSHS).

**Functional Job Analysis**

**Paramedic Characteristics**

The paramedic must be a confident leader who can accept the challenge and high degree of responsibility entailed in the position. The paramedic must have excellent judgment and be able to prioritize decisions and act quickly in the best interest of the patient. He/She must be self-disciplined, able to develop patient rapport, interview hostile patients, maintain a safe distance, and recognize and utilize communication unique to diverse multicultural groups and ages within those groups. The paramedic must be able to function independently at an optimum level in a non-structured environment that is constantly changing.
Even though the paramedic is generally part of a two-person team working with an EMT, it is the paramedic who is held responsible for safe and therapeutic administration of medications, 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 entail 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 (e.g., antidepressants and other anti-psychotics), anticholinergics, choleretics, muscle relaxants, anti-dysrhythmics, anti-hypertensives, anticoagulants, diuretics, bronchodilators, ophthalmics, pituitary drugs, gastrointestinal drugs, hormones, antibiotics, antifungals, anti-inflammatory drugs, serums, vaccines, anti-parasitics, and others.

The paramedic is personally responsible—legally, ethically, and morally—for each drug administered, as well as using correct precautions and techniques, observing and documenting the effects of the drugs administered, keeping his/her 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 makeup, and using drug reference literature.

The responsibility of the paramedic includes obtaining a comprehensive drug history from the patient that includes name 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 nonprescription/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 and special concerns related to newborns and geriatric patients. He/She must also be aware of 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 remeasure drip rates for controlled substances/medications is essential. Once medication is stopped or not used, the paramedic must send back unused portions to the proper inventory arena.

The paramedic must be able to apply basic principles of mathematics to the calculation of problems associated with medication dosages, perform conversion problems, differentiate temperature reading between centigrade and Fahrenheit scales, be able to use proper Advanced Life Support (ALS) equipment and supplies based on a patient’s age and condition of veins (i.e., proper size of Intravenous [IV] needles), and be able to locate sites for obtaining blood samples. The paramedic must be able to administer medication intravenously, administer medications by gastric tube, administer oral medications, administer rectal medications, and comply with universal precautions 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, have knowledge of poisons, and be able to administer treatment. The
Paramedic must be knowledgeable about 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 a patient’s needs and the effect that occurs.

The paramedic must also be capable of providing ALS emergency medical services to patients including conducting and interpreting ECGs, performing electrical interventions to support cardiac functions, performing advanced ET intubations in airway management and relief of pneumothorax, and administering appropriate IV fluids and drugs under the direction of an 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 judgment 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 including responding to calls in districts known to have high crime 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 (57 kilograms). Motor coordination is necessary because over uneven terrain, the patient’s, the paramedic’s, and other worker’s well-being must not be jeopardized.

**Comments**

The paramedic provides the most extensive prehospital care and may work for fire departments, private ambulance services, police departments, or hospitals. Response times are dependent on the nature of the call. For example, a paramedic working for a private ambulance service that transports the elderly from nursing homes to routine medical appointments and checkups may endure somewhat less stressful circumstances than a paramedic who works primarily with 911 calls in districts known to have high crime rates. Thus, the particular stresses inherent in the role of the paramedic can vary depending on place and type of employment. However, in general, the paramedic must be flexible to meet the demands of the ever-changing emergency scene. When emergencies exist, the situation can be complex and care of the patient must be started immediately. In essence, the paramedic in the EMS system uses advanced training and equipment to extend emergency physician services to the ambulance.

The paramedic must be able to make accurate, independent judgments while following oral directives. The ability to perform duties in a timely manner is essential, because 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 the 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 one’s impression of a patient’s condition orally to a dispatcher and other concerned staff is critical because the paramedic works in emergency conditions where there may not be time for deliberation. The paramedic must also be able to accurately report all relevant patient data, both orally and in writing. 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 the ambulance. Verbal skills and reasoning skills are used extensively.

**Qualifications**

Paramedics must meet the following requirements:

- Successfully complete approved curriculum with passing scores on written and practical certification examinations as defined by programmatic guidelines. *(Note: Recertification is dependent on an individual’s successful completion of interagency-approved paramedic continuing education freshener courses.)*
- Be at least 18 years of age and be a high school graduate or equivalent
- Have proof of a valid driver’s license
- Able to communicate verbally, via telephone and radio with dispatch, other first responders, and health care providers to manage the prehospital scene and patient care
- Able to lift, carry, and balance up to 125 pounds (57 kilograms) (250 pounds [113 kilograms] with assistance)
- Able to interpret and respond to written, oral, and diagnostic form instructions
- Able to use good judgment and remain calm in a high stress situation and take on role of leader
- Able to read road maps and accurately discern street signs and address numbers
- Able to read medication/prescription labels and directions for usage in quick, accurate, and expedient manner
- Able to communicate verbally with patients and bystanders in diverse cultural and age groups
- Able to interview patient, family members, and bystanders
- Able to discern deviations/changes in eye/skin coloration due to patient’s condition and to the treatment given
- Able to document, in writing, all relevant information in prescribed format in light of legal ramifications of such
- Have good manual dexterity with ability to perform all tasks related to advanced emergency patient care and documentation
- Able to bend, stoop, balance, and crawl on uneven terrain
- Able to withstand varied environmental conditions such as extreme heat, cold, and moisture

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• Able to perform quick, precise, practical mathematical calculations pertinent to ratio and proportion of medication and supplies used in emergency patient care
• Be independent, confident, and able to work independently without defined structure
• Have good stable reasoning with ability to draw valid conclusions expediently relevant to patient’s condition often using limited information
• Have knowledge and skills relevant to position and be able to implement them in stressful situations
• Be cognizant of all legal, ethical, and moral obligations inherent within scope of practice

Procedure for Certification/Licensure of Emergency Medical Services (EMS) Personnel

All EMS personnel practicing in Texas must be certified or licensed by TxDSHS. The steps for paramedic certification/licensure are as follows:

1. Successfully complete a TxDSHS-approved training program. The TEEX/Emergency Services Training Institute (ESTI) EMS Program is a TxDSHS-approved training program and is also accredited by the CAAHEP upon the recommendation of the CoAEMSP. Refer to program completion requirements on page 6–page 16.
2. Pass the National Registry's written and practical testing and obtain National Registry certification. Refer to detailed National Registry certification requirements on page 16–page 18.
3. Obtain TxDSHS certification or licensure. Refer to detailed TxDSHS requirements on page 18–page 19.

Texas A&M Engineering Extension Service/Emergency Services Training Institute (TEEX/ESTI) Paramedic Program Completion Requirements

To successfully complete the TEEX/ESTI Paramedic Program and be eligible to apply for National Registry/TxDSHS certification, the student must successfully complete the classroom/lab course, EMS130 (slow-paced), EMS135 (fast-paced), or EMS137 (off-site course) and the clinical/field course (EMS136) in a continuous series.
Classroom/Lab Course (EMS130 [Slow-Paced), EMS135 [Fast Paced], or EMS137 [Off-Site Course]) Completion Requirements

In order to successfully complete EMS130/EMS135/EMS137, a student must:

1. Complete the required online courses by the stated deadline:
   - Anatomy and Physiology, Pathophysiology, Medical Terminology, and Medication Calculations are the required online co-requisite courses.
   - The student must take each chapter exam and score a minimum of 70 percent before he/she can progress to the next chapter. A student has unlimited attempts at each chapter exam and may take them as many times as desired.
   - Once each chapter is complete, there is a comprehensive final exam on which the student must score a minimum of 75 percent. A student has unlimited attempts at the final exam and may take it as many times as desired.
   - A student may be exempt from any/all of the online courses if he/she has completed a similar college-level course with a minimum grade of C within 5 years. The program manager will review the transcript and course description to determine similarity. The program manager’s decision is final.

2. Complete all homework/quizzes/assignments, module exams, and the comprehensive final with an overall weighted grade of 70 percent:
   - Homework, medication quizzes, and in-class quizzes/assignments will be averaged to be 15 percent of the overall grade:
     - Homework turned in late will be assessed a 10 percent per calendar day penalty. For example, a homework assignment turned in 2 days late will have a maximum grade of 80.
     - Each medication quiz may be taken a maximum of three times to score a minimum of 80 percent. Retests must be scheduled with the instructor and taken outside of regular class time. All attempts of a single quiz will be averaged to record the final grade for that quiz. All attempts must be completed within 10 calendar days of the initial date. **Students not earning a minimum of 80 percent on any of three attempts will not be eligible for course completion.**
     - Students that are absent with prior notice will be allowed to make up an in-class quiz or assignment. Students absent without prior will receive a grade of zero for any missed in-class quiz or assignment.
   - There are six TEEX exams (preparatory, medication math, general pharmacology, patient assessment-communication-documentation, ECG interpretation, and medications) that will be averaged to be 25 percent of the overall grade:
     - Students absent for an exam with prior notice will be required to take the exam on or before their next day of attendance. Students absent without prior notice will receive a grade of zero. Makeup/Retest exams must be scheduled with the instructor and taken outside of regular class time.
• Students earning less than 70 percent on any exam must retest on a different version of the exam. Retests must be scheduled with the instructor and taken outside of regular class time. The initial and retest grades are averaged to record the final grade for that exam. Retests must be completed within 10 calendar days of the initial date.

• The ECG interpretation is considered a skills exam. Students have three attempts to score a minimum of 70 percent. **Students not earning a minimum of 70 percent on any of three attempts will not be eligible for course completion.**

- Fisdap airway/respiratory, cardiology, medical, trauma, obstetrics/pediatrics, and EMS operations exams will be averaged to be 35 percent of the overall grade:
  
  • Students absent with prior notice for an exam will be required to take the exam on or before their next day of attendance. Students absent without prior notice will receive a grade of zero. Makeup exams must be scheduled with the instructor and taken outside of regular class time.
  
  • Students earning less than 70 percent on any exam must retest the exam. Students are highly encouraged to use their learning prescription to prepare for the retest. Retests must be scheduled with the instructor and taken outside of regular class time. The initial and retest grades are averaged to record the final grade for that exam. Retests must be completed within 10 calendar days of the initial date.

  **Note:** Except for the ECG exam, each TEEX and Fisdap exam may be retaken only once, but students have a maximum of nine retests for the twelve exams. The ECG exam may be retaken twice. Students that score less than 70 percent on an exam after using all nine retests are not able to retest.

- The Fisdap comprehensive final exam will be 25 percent of the overall grade:

  • To be eligible to take the comprehensive final exam, each student must have:
    
    – taken all TEEX and Fisdap unit exams and, if needed, retests; and
    
    – passed all required skill exams and portfolio scenarios. The Fisdap lab practice report must show everything is 100 percent complete.
  
  • Students earning less than 70 percent on the exam must retest. Students are highly encouraged to use their learning prescription to prepare for the retest. Retests must be scheduled with the instructor and taken outside of regular class time. The initial and retest grades are averaged to record the final grade for that exam. The first retest must be completed within 10 calendar days of the initial date.

3. Score a minimum of 70 percent on the Fisdap comprehensive final exam. **Students not earning a minimum of 70 percent on the initial attempt or retest will not be eligible for course completion.**

4. Attend a minimum of 90 percent of the classroom/lab instructional hours:

  • The Paramedic Program is considered a workforce training experience; therefore, students are expected to attend class the same way they would be expected to report to work. Consistent and punctual attendance is expected. In the event a student will be late, leave early, or be unable to attend a scheduled class session, that student is expected to provide prior written
notice via email to the lead instructor and program manager. No shows (i.e., absent without prior notice) are not tolerated in the workplace and will not be tolerated here.

- There are 188 hours of lecture and 132 hours of skill lab scheduled; consequently, the maximum absent time allowed is 19 hours per student from lecture and 13 hours per student from skill lab. There is no differentiation between excused/unexcused absence and it is the student’s responsibility to manage his/her time and school, work, family, and personal commitments accordingly. Legally required absence (e.g., jury duty, service deployment, etc.) are exempt; however, the time missed for these absences will not increase the maximum allowable hours of absence. When a student reaches 15 hours absent from lecture or 10 hours from skill lab, he/she will be counseled by the instructor or program manager and placed on attendance warning. **A student absent for more than the allowed hours will not be eligible for program completion.** A student, with good cause, may request reinstatement by submitting a written statement to the EMS program manager. The decision of the program manager is final:

  • Students will sign in and out for each class session on the form provided by the instructor. Attendance will be monitored on an hourly basis and credit will be earned only for hours of complete attendance. Tardiness is defined as not being present when class begins. Early departure is defined as leaving prior to the instructor releasing the class. Any part of an hour with time missed due to tardiness or early departure will be recorded as an absence. The sign in/out sheet will remain in the classroom until the end of the day. **If the student is tardy or must leave early, it is the responsibility of the student to record the actual time he/she arrived and departed.** The failure of a student to sign the sheet indicating he/she was late or left class early will be considered an attempt at deception. This deception, or any other falsification of the time sheet, indicates a lack of integrity/honesty and is grounds for disciplinary action, including failure of the course and dismissal from the Paramedic Program. **Students are not allowed to not sign in/out for another student. If a student fails to sign the attendance sheet, the program manager will assume the student was not in class and the student will be marked absent.**

  • Any time a student is absent, it is his/her responsibility to contact the instructor to see what was missed and if any handouts or assignments were disbursed.

  • **A student that misses 32 consecutive hours of the program without communication to the instructor or program manager will be administratively withdrawn.**

5. Pass all in-lab skill verifications required for clinical authorization. TEEX or National Registry skill sheets and grading criteria will be used to determine pass/fail.

All students will have two attempts to pass each instructor-led skill/scenario evaluation. If a student fails the retest, he/she must undergo instructor-led retraining. After retraining, the student will have one more attempt. All retests must be conducted by different instructors with different scenarios. **Students failing all three attempts will not be eligible for course completion.**
Skill verifications will be documented in Fisdap and students have a maximum of 72 hours after a lab session to document skill performance. *Skills not documented appropriately are considered invalid and do not count toward the requirement:*

- Skill verifications required before emergency department, respiratory care, and cadaver lab or operating room/anesthesia experiences.
  - **Basic skills:**
    - Hemorrhage control
    - Bag Valve Mask (BVM) ventilation of apneic adult
    - Cardiac arrest management/Automated External Defibrillator (AED)
    - Spinal immobilization: supine
    - Spinal immobilization: seated
    - Joint splinting
    - Long bone splinting
    - Traction splinting
    - Glucometer
  - **IV/Intraosseous (IO) access and medication administration:**
    - IV therapy
    - Medication administration: IV bolus
    - Medication administration: IV piggyback infusion
    - Medication administration: inhaled medication
    - Medication administration: Intranasal (IN) spray
    - Medication administration: Subcutaneous (SubQ) injection
    - Medication administration: Intramuscular (IM) injection
    - Medication administration: ET route
    - Adult IO access and fluid administration
  - **Patient assessment:**
    - Obtain a patient history from an alert/oriented patient
    - Comprehensive normal adult physical assessment techniques
    - Comprehensive normal pediatric physical assessment techniques
  - **Airway/Ventilation management:**
    - Stoma and tracheostomy tube management
    - Continuous Positive Airway Pressure (CPAP) and Positive End-Expiratory Pressure (PEEP)
    - Direct orotracheal intubation: adult
– Direct orotracheal intubation: pediatric
– Nasotracheal intubation
– ET suctioning
– Supraglottic airways: Laryngeal Mask Airway (LMA), King, and i-gel insertion
– Nasogastric tube insertion

– Skill verifications required before cardiac catheterization lab, telemetry, and cardiac/intensive care unit:
  • Medical and cardiac assessment
  • 12-lead ECG acquisition
  • Synchronized cardioversion
  • Defibrillation
  • Transcutaneous pacing
  • Static cardiology: ECG interpretation and Advanced Cardiac Life Support (ACLS) management
  • Dynamic cardiology: ACLS megacode

– Skill verifications required before labor/delivery and newborn nursery:
  • Normal delivery with newborn care
  • Abnormal delivery with newborn care

– Skill verifications required before EMS experiences:
  • Trauma assessment and management
  • Trauma adult physical assessment
  • Trauma ET intubation: adult
  • Pleural decompression (needle thoracostomy)
  • Needle cricothyrotomy
  • Surgical cricothyrotomy

6. Pass all six stations in a mock National Registry psychomotor exam:

At the end of the didactic phase, the students will be evaluated in a mock National Registry psychomotor exam (static cardiology, dynamic cardiology, trauma assessment/management, oral A, oral B, and OOH scenario). National Registry skill sheets and grading criteria will be used. Each student will have three attempts to pass each station. Each attempt must be a different scenario and be evaluated by a different instructor. Any third attempt must be evaluated by the program manager or medical director. **Students failing all three attempts will not be eligible for course completion.**
7. Pass an affective evaluation conducted by instructors and peers:
   - Instructors and fellow students will evaluate each student on integrity, empathy, self-motivation, professional appearance, self-confidence, interpersonal communications, time management, teamwork/diplomacy, and respect.
   - Repetitive inappropriate behavior may be grounds for non-completion of the program.

8. Be cleared in CastleBranch on or before the clinical start date stated on the course schedule and complete a minimum of 48 hours of clinical experience by the end of lecture/lab sessions.

Clinical/Field Course (EMS136) Completion Requirements

In order to be cleared to begin clinical/field experiences and successfully complete EMS136, students must:

1. Be cleared for clinical participation. Clinical clearance is obtained through CastleBranch by completing the following steps:
   - Go to https://teex.castlebranch.com/TW61/package-selection and create an account.
   - Consent to a background check, which will be initiated by CastleBranch upon account creation and payment.
   - Print orders and schedule the mandatory drug screening.
   - Upload the following documents into your CastleBranch portal:
     • Measles (Rubeola), Mumps, and Rubella (MMR): proof of two vaccinations or positive titer
     • Varicella (chickenpox): proof of two vaccinations or positive titer
     • Hepatitis B: proof of three vaccinations or positive titer (Note: proof that the series is in progress with two vaccinations complete will be accepted)
     • Tuberculosis (TB): proof of one of the following within the last six months:
       – One-step TB skin test
       – Quantiferon-TB Gold blood test
       – T-Spot blood test
       – Interferon-Gamma Release Assays (IGRA) blood test
       – Negative chest x-ray with physician documentation stating student is TB free
     • Tetanus, Diphtheria, and Pertussis (Tdap): administered within 10 years
     • Influenza (flu): documentation of a flu vaccine during the current flu season
     • Meningitis (if under the age of 30): proof of vaccination within the past 5 years
     • Cardiopulmonary Resuscitation (CPR) certification: documentation of current Basic Life Support (BLS) Provider certification provided by American Heart Association or American Red Cross only
     • Health insurance card with student name or letter of eligibility from insurance carrier
Completion Requirements

- Professional license (if enrolling in Paramedic course)
- High school diploma, GED certificate, or college transcript
- Driver’s license valid throughout class and clinical

**Note:** *CastleBranch clearance times can vary depending on the time of year. Students are advised to initiate their account and upload all documents as soon as possible to ensure their clinical clearance. Clinical extensions are not given due to student failure to complete clinical clearance prior to their clinical start date. TEEX will not be held responsible for a student not completing clinicals due to non-compliance with clinical clearance requirements.*

2. Pass all in-lab skills verifications described in #5 on page 9.

3. Schedule and complete the following hours by the clinical/field deadline:
   - Emergency department: 80 hours
   - Respiratory care: 8 hours
   - Operating room/anesthesia or cadaver lab: 8 hours
   - Cardiac catheterization lab and/or telemetry: 8 hours
   - Intensive care unit: 8 hours
   - Labor/Delivery and newborn nursery: 8 hours
   - EMS formative experiences: 240 hours

4. In addition to the hours and departments listed, each student must meet the following patient age and condition requirements:
   - Patient age:
     - Pediatric: 20 pediatric-aged patients (at least 2 in each age group):
       - Newborn (birth to 1 month)
       - Infant (1 month to 1 year)
       - Toddler (13 months to 3 years)
       - Preschool (4–5 years)
       - School-age (6–13 years)
       - Adolescents (14–17 years)
     - Adult (18–64 years): 40 adult-aged patients
     - Geriatric (65 and older): 20 geriatric-aged patients
   - Patient complaints:
     - Altered mental status: 5 patient complaints
     - Abdominal pain: 4 patient complaints
     - Adult dyspnea: 2 patient complaints
Completion Requirements

- Chest pain: 10 patient complaints
- Pediatric dyspnea: 2 patient complaints

  Clinical impressions:
  - Abdominal: 4
  - Cardiac: 20
  - Acute coronary syndrome: 2
  - Neurologic/Stroke: 2
  - Obstetrics/Gynecology: 5
  - Psychiatric/Behavioral: 5
  - Respiratory: 20
  - Medical (other): 40
  - Trauma: 40

5. During the formative EMS experiences, the student must have at least forty responses, with at least twenty transports meeting ALS criteria. All calls to which the assigned unit is dispatched to must be properly documented in Fisdap including cancellations, refusals, and BLS transports.

6. While caring for a patient, students must successfully perform the following skills/procedures.
  - Ventilation of a patient: 5
  - Insert an advanced airway (ET or supraglottic): 10
  - IV access: 40
  - Medication administration: 24 total:
    - IV bolus or piggyback: 20
    - IM or SubQ: 2
    - Inhaled or IN: 2
  - ECG interpretations: 20 (no more than 10 can be Normal Sinus Rhythm [NSR])

All patient contacts and skills must be properly documented in the Fisdap tracking system within 72 hours after each shift. Refer to the clinical/field syllabus for details. Shifts not properly documented will be considered invalid and not count toward completion requirements.

7. Once a student successfully meets all requirements in 1–6, their formative clinical shifts will be audited. Upon clearance, the student will be notified of permission to schedule his/her capstone EMS internship. Audits take a minimum of 5 business days to complete. Once cleared for capstone, the student must:
  - Request a site and dates and, once approved, attend 120 EMS hours with a TEEX-approved capstone EMS provider. A majority of the hours must be with the assigned primary field preceptor. The remainder can be with a secondary preceptor that has direct communication with the primary.
– Act in the role of team lead on at least ten transports, of which five must meet ALS criteria.
– Correctly record and document all patient contacts and dispatched calls in Fisdap and submit a completed capstone competency packet to the clinical coordinator for a final audit.

8. Once a student successfully meets all capstone EMS internship requirements, he/she will be cleared to take the program summative exam. To pass that exam, the student must:
   – Schedule the summative written and psychomotor exams through the clinical coordinator.
   – Earn a minimum of the calculated cut score on the summative written exam:
     • The test and the cut score will be developed by Fisdap or a similar validated test provider.
     • Students earning less than the calculated cut score on the exam may retest once.
     • Retests must be scheduled with the EMS Program Office from published dates/times.
     • If a student does not pass the second attempt of the summative written exam, he/she must successfully complete a Paramedic Refresher course. Refresher course completion will grant a student two more attempts to pass the summative written exam.
     • Failure of four attempts at the summative written exam will constitute non-completion of the TEEX Paramedic Program and the student would have to register for and successfully complete an entire new program.
   – Pass the summative psychomotor scenario conducted/evaluated by a three-member review panel:
     • Once the student passes the summative written exam, he/she will schedule the summative psychomotor scenario from available dates/times.
     • The student will function as the team leader of a two-person EMS crew. The team leader must manage the scene, conduct the patient assessment, develop a field impression, and formulate/implement a treatment plan. The team leader may delegate skills to team members if the skill is within the member’s scope of practice.
     • Panel members should, when possible, include:
       – an instructor;
       – the clinical coordinator or lab manager; and
       – the medical director or program manager.
     • The National Registry OOH Scenario evaluation sheet and grading criteria will be used to determine pass/fail.
     • Each student will have three attempts to pass the psychomotor scenario. Each attempt must be a different scenario, team member, and panelists. The panel for the third attempt must include the program manager or medical director. Students failing all three attempts will not be eligible for course completion.
   – Pass a summative affective evaluation:
     The final affective evaluation documented by the capstone EMS internship preceptor will be used for this evaluation.
**Requirements for National Registry of Emergency Medical Technicians (National Registry) Certification**

**Note:** The cost for National Registry certification is not included in tuition.

Individuals applying for National Registry Paramedic (NRP) certification must meet the following requirements:

1. Have a current National EMT Certification (National Registry) or state license at the EMT level or higher.
2. Successfully complete a CAAHEP-accredited paramedic program (or a program that has been issued a CoAEMSP letter of review) within the past 2 years. The course program director must verify the candidate’s successful completion of the course through the National Registry website.
3. All Paramedic candidates who started their paramedic education program after August 1, 2016, are required to complete a psychomotor competency portfolio.
   - Program directors must verify that candidates have met the requirements of the portfolio through the National Registry website.
4. Have a current CPR Basic Life Support (BLS) Provider certification or equivalent credential.
5. Successfully complete the National Registry cognitive (knowledge) and psychomotor (skills) exams.
   - Passed portions of each examination (cognitive and psychomotor) remain valid for twenty-four months.

**Application Process**

2. Submit a National Registry application and answer all questions truthfully.
   - The National Registry may deny certification or take other appropriate actions in regard to applicants for certification or recertification when a criminal conviction has occurred.
3. Pay the application fee of $125 (U.S. funds). The application fee is non-transferable and non-refundable. **This fee is charged for each attempt of the cognitive examination.**

Candidates will receive an electronic Authorization to Test (ATT) once they are eligible for the exam. The electronic ATT contains scheduling instructions and important details concerning proper identification required at testing centers. The ATT can be found in the Check Application Status page.

**Cognitive Examination**

The NRP cognitive exam is a Computer Adaptive Test (CAT) (https://www.nremt.org/rwd/public/document/cognitive-exam). The number of items a candidate can expect on the NRP exam will range from 80 to 150. Each exam will have between 60 and 130 live items that count toward the final score. The exam will also have 20 pilot questions (https://www.nremt.org/rwd/public/document/cognitive-exam) that do not affect the final score. The maximum amount of time allowed to complete the exam is 2 hours and 30 minutes.
The exam will cover the entire spectrum of EMS care including: airway, respiration, and ventilation; cardiology and resuscitation; trauma; medical; obstetrics/gynecology; and EMS operations. Items related to patient care are focused on adult and geriatric patients (85 percent) and pediatric patients (15 percent). In order to pass the exam, candidates must meet a standard level of competency. The passing standard is defined by the ability to provide safe and effective entry-level emergency medical care.

**Paramedic Cognitive Exam Test Plan**

Based on the most recent practice analysis, the National Registry Board approves a cognitive exam test plan. A test plan is a blueprint that tells the computer testing software how to build a candidate’s exam. Table 1 indicates what percent of the test will focus on each topic area.

**Table 1: Paramedic Cognitive Exam Test Plan**

<table>
<thead>
<tr>
<th>Content Area</th>
<th>Percent of Exam</th>
<th>Adult/Pediatric Mix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Airway, respiration, and ventilation</td>
<td>18–22 percent</td>
<td>85 percent adult; 15 percent pediatric</td>
</tr>
<tr>
<td>Cardiology and resuscitation</td>
<td>22–26 percent</td>
<td>85 percent adult; 15 percent pediatric</td>
</tr>
<tr>
<td>Trauma</td>
<td>13–17 percent</td>
<td>85 percent adult; 15 percent pediatric</td>
</tr>
<tr>
<td>Medical: obstetrics and gynecology</td>
<td>25–29 percent</td>
<td>85 percent adult; 15 percent pediatric</td>
</tr>
<tr>
<td>EMS operations</td>
<td>10–14 percent</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Psychomotor Examination**

Paramedic candidates are tested on six skills: patient assessment – trauma; dynamic cardiology, static cardiology, oral station case A, oral station case B, and an integrated OOH scenario.

**Patient Assessment – Trauma**

In Patient Assessment – Trauma, candidates are required to perform a hands-on, head-to-toe, physical assessment and voice treatment of a simulated patient for a given scenario (https://content.nremt.org/static/documents/P301%20NREMT%20Patient%20Assessment%20-%20Trauma.pdf), including:

- Scene size up
- Primary survey/resuscitation
- History taking
- Secondary assessment
**Cardiac Management Skills**

Candidates are evaluated on their ability to manage cardiac arrhythmias and interpret ECGs. This will be verified in two portions:

- In Dynamic Cardiology, candidates will be evaluated on their ability to manage a cardiac arrest situation, including actual delivery of electrical therapy and voicing all interpretations and treatments given a scenario. The presentation of the portion will be similar to a megacode (https://content.nremt.org/static/documents/P306%20NREMT%20Dynamic%20Cardiology.pdf).

- In Static Cardiology, given four prepared ECG tracings with associated patient information, candidates must verbalize the interpretation of each rhythm and voice all associated treatments (https://content.nremt.org/static/documents/P307%20NREMT%20Static%20Cardiology.pdf).

**Oral Station: Scenarios A and B**

In the Oral Station, candidates will be evaluated on their ability to verbally manage all aspects of an OOH call given two separate cases: oral case A and oral case B (https://content.nremt.org/static/documents/Draft%20NREMT%20Oral%20Station.pdf).

In each case, candidates will be evaluated in the following categories:

- Scene management
- Patient assessment
- Patient management
- Interpersonal relations
- Integration (verbal report, field impression, and transport decision)

**Integrated Out-of-Hospital (OOH) Scenario**

The Integrated OOH Scenario, will reflect either a pediatric, geriatric, or adult patient. Candidates will be provided with a professional paramedic partner and evaluated on their ability to manage a call, lead a team, effectively communicate, and maintain professionalism throughout the simulated patient encounter (https://content.nremt.org/static/documents/Draft%20NREMT%20Integrated%20Out-of-hospital%20Scenario.pdf).

**Requirements for Texas Department of State Health Services (TxDSHS) Paramedic Certification/Licensure**

A candidate for EMS certification/license must complete the following requirements within 2 years of successful course completion:

- Be at least 18 years old
- Have a high school diploma or GED certificate
- Successfully complete a TxDSHS-approved EMS training course
Uniform and Personal Appearance Policy

Students are expected to comply with all aspects of this uniform and personal appearance policy while in classroom sessions, clinical experiences, and EMS rideouts. Students not in substantial compliance will not be allowed to participate and will be considered absent:

1. When attending class, an assigned clinical experience, or an EMS rideout, the following uniform will be worn, unless the clinical affiliate requires changing into scrubs or other special clothing. Even in
those cases, the following uniform must be worn to the clinical site. The uniform should be clean, neat, and display a professional appearance:

- **Shirt:**
  - Classroom, clinical, and field internship: light blue class B button-down uniform shirt:
    - A long-sleeved solid dark navy blue or black T-shirt or sweatshirt may be worn under the uniform shirt. Shirts are to be tucked into the pants.
    - Each student will be issued two TEEX EMS Program patches to be affixed to the right sleeve of the class B shirt.
  - Skills lab: Students may have the gray TEEX EMS Program T-shirt under their class B shirt and may remove the class B shirt when authorized by the instructor. Shirts are to be tucked into the pants.

- **Pants:** full-length, dark navy blue or black uniform style pants with a black belt (must be worn)

- **Footwear:** solid black shoes or boots made of non-porous material with a sturdy sole; must be closed-toed and include a closed heel:
  - Polishable footwear should be polished.
  - Socks, if visible, must be solid black or navy blue in color.

- **Photo identification:** TEEX/ESTI-issued photo identification should be clipped to the right shoulder of the shirt and clearly visible.

- **Watch:** The watch must be capable of measuring seconds and should allow for adequate hand washing. A waterproof watch is highly recommended.

- **Coat/Sweater/Jacket:** If worn, it must be a solid dark navy blue or black. The TEEX EMS Program patch may be affixed to the right sleeve.

- **Cap:** A dark navy blue or black TEEX cap purchased from Gift Shop may be worn during EMS rideouts. No caps are allowed in the classroom, lab, or hospital rotations.

- **Personal equipment/supplies:** A stethoscope, penlight, and heavy-duty scissors or shears capable of cutting clothing and leather are required during clinical/field experiences.

2. When attending class, an assigned clinical experience, or EMS rideout, the student must abide by the following policy concerning personal appearance:

- **Students must maintain good personal hygiene. Cleanliness and grooming are necessary to prevent disease transmission and are an indication of professionalism.**

- **Hair should be neat, clean, and short enough, or pulled back from the face, so that it does not interfere with the student while performing procedures or potentially contaminate sterile fields.** Students must avoid extremes in hair style and color. Hair style or color will be such that it does not invite negative feedback from patients or affiliate staff. Except for religious or ethnic requirements, no ribbons, bows, jewelry, or scarves may be worn in the hair. Barrettes or other elastic bands used to keep the hair back must be black or navy blue in color and not have excessive ornamentation.
– Facial hair on men should not impede Personal Protective Equipment (PPE). Any facial hair must be fully grown at the beginning of the course (or grown during extended breaks) and be kept well-groomed and closely trimmed; otherwise, the face will be clean shaven.
– Jewelry will be limited to a watch, wedding or engagement ring, and earrings as described in this policy. Male and female students are allowed to wear only one stud earring in each ear. Rings with sharp/pointed edges are discouraged because they tend to tear gloves that must be worn during patient care.
– Other than earrings meeting the previously mentioned policy, no other visible body piercing, including the tongue, is acceptable.
– Fingernails should be clean, relatively short, and well-manicured. Clear, non-chipped nail polish may be worn. Artificial nails (including overlays) are not permitted.
– Body graphics or tattoos must be covered at all times during clinical and EMS experiences.
– Perfume, cologne, or after shave will not be worn during clinical or EMS experiences.

**Classroom/Campus Conduct**


In addition to the policies and expectations stated in the *TEEX Participant Handbook*, the following apply to students in any course offered by the EMS Program:

1. When attending class, lab, clinical/field experiences, or any other activity as a student, the student must abide by the uniform and personal appearance policy as stated in this handbook. Any time a student is in uniform he/she is expected to act professionally and be respectful of others. This includes off-campus, non-school related activities. Students are representing TEEX, ESTI, the EMS profession, and most importantly, themselves.
   
   Professionalism will be evaluated by the course instructors and is part of the grading scheme.

2. Punctual attendance is important in the workplace and is important here. Students are expected to be in their seats, ready to learn, at the designed time. If a student is running late or will be absent, he/she should text or email the instructor prior to the beginning of class.

3. The TEEX/ESTI EMS Program is committed to maintaining a classroom environment that is professional and conducive to learning:
   – Students must pay strict attention to the instructor at all times. Sidebar conversations are distracting and disruptive. If students need clarity on an issue, ask the instructor.
   – Students arriving late or leaving during an active class or lab session should minimize disruption by entering/leaving via the door at the back of the classroom.
– Pagers, cell phones, and radios must be in a silent mode or turned off. Unless an emergency is anticipated, a student must not answer or respond to calls or pages during an active classroom session.

– Profanity will not be tolerated.

4. When in the computer lab:
– The computer lab is open Monday through Friday, 8:00 a.m.–5:00 p.m., for student use.
– No food or drinks are allowed in the computer lab.
– No electronic devices (e.g., cell phones, laptops, tablets, smartwatches, calculators, etc.) are allowed into the computer lab when taking a quiz or exam.
– No textbooks, workbooks, notebooks, or notes are allowed in the computer lab during quizzes or exams unless authorized by the test proctor.
– Computer monitors and Central Processing Units (CPU) are to be left alone. No moving monitors/CPUs or adjusting screen settings.
– Access to non-TEEX approved websites is not allowed.
– Log off and push the chair back under the table when finished using the computer.

5. When in the EMS simulations lab:
– Students are not allowed to utilize the skill lab without an instructor or EMS staff member present.
– No food or drink is allowed in the skill lab.
– Proper safety precautions are to be utilized while in the lab:
  • All sharps are to be properly disposed of in a marked sharps container.
  • Any supplies contaminated with blood or other potentially infectious material will be placed in a biohazard receptacle. Items not contaminated should be placed in a standard trash receptacle.
– Manikins and lab equipment/supplies are to be used only for the purpose intended.
– Any spills or other mess are to be reported to the instructor and cleaned up immediately.
– Do not rearrange equipment/supplies in the cabinets, crash carts, and ambulance. All equipment is to be placed in its assigned location.
– At the end of a lab session, students are to assist the instructor(s) in putting away equipment, replacing supplies, and cleaning the lab. Students should not leave until dismissed by the lead instructor.

6. Tips for academic success include:
– Attend every class.
– Sit in the center of the first three rows of the classroom to be able to see and hear more clearly and be less distracted.
- Introduce yourself to each instructor as time permits (on break, before/after class) within the first 2 weeks of the class start.
- Then, meet with each instructor at least twice more during the class.
- Read all assignments before class.
- During class, stay awake and take good notes. Ask questions in class.
- Find a study partner in each class and meet once a week to exchange information and review notes.
- Review textbooks and notes after each class and fill in any missing information.
- Seek tutoring and additional departmental help when it is needed.
- Attend all review sessions and supplemental instruction sessions for each class.
- Find a quiet place to study for at least 2 hours for slow-paced classes and at least 4 hours for fast-paced classes between class sessions. Study in an environment as similar to the test-taking facility as possible (e.g., in a chair, at a desk, quiet, no food, no drinks, etc.).
- Treat school like a full-time job. Schedule other activities around scheduled class time as well as supplemental study time. Use a day planner for effective time management.

7. Tips for successful test taking include:
- Read the entire question, carefully reading every word.
- Formulate an answer in your head.
- Read all available answers, remembering the answer you formulated, and try to find the answer that best matches your answer.
- If your answer does not match any of the available answers, re-read the question looking for words like except, but, and not.
- If you are not sure of an answer, bookmark the question so you can review it later.
- If you are not able to formulate an answer to the question, try to eliminate as many answer possibilities before guessing an answer.
- Do not change an answer to a question unless you are absolutely positive you know the answer (e.g., you selected A when you meant to select B). Your first instinct is usually correct.

Note: The current version of the TEEX Participant Handbook can be found at https://teex.org/documentsresources/participant-handbook.pdf.
Program Dismissal

Students of the TEEX/ESTI EMS Program may be dismissed from the program for reasons including but not limited to:

- Conviction of a federal, state, or local law or failure to disclose previous convictions
- Harassment or sexual harassment of a student, TEEX employee, patient, or employee of a clinical/field affiliate
- Failure to submit clinical/field eligibility requirements and be cleared by the announced deadline (Note: Students initially cleared must maintain clearance until all clinical/field requirements are met.)
- Academic failure of the lecture/lab portion of the program (i.e., EMS135)
- Performing a skill or procedure in the clinical/field setting that is not within the student’s authorized scope of practice
- Academic dishonesty:
  - Cheating or assisting someone else to cheat on a quiz, exam, or skill verification
  - Falsifying clinical/field documentation
- Inappropriate, unprofessional behavior during class, lab, clinical, or field experiences

If a student is suspected of any of these listed behaviors, an investigation will be conducted by the EMS training manager. If the investigation reveals evidence supporting dismissal, the training manager will forward a recommendation for dismissal and supporting documentation to his/her immediate supervisor. The recommendation will be reviewed and, if supported, may be forwarded up the appropriate chain of command to the division director. The ESTI division director will make the final decision.

Other Policies

Disability Accommodations

TEEX will strive to provide reasonable accommodations to participants that qualify under the Americans with Disabilities Act (ADA). Participants may submit documentation and the TEEX Accommodation Request Form to the TEEX accessibility coordinator at any time (studentservices@teex.tamu.edu); however, it is recommended to initiate a request at least 2 weeks prior to the start of the class to allow a reasonable time for review and coordination of the accommodations. TEEX will make efforts to facilitate the accommodation request; however, should TEEX not be able to make timely accommodations, the students will be given the option to transfer to a future class.

If approval is granted by the TEEX EMS Program, this does not guarantee that students will have the same accommodation approved by the National Registry at the time of certification examination.
Students who wish to request accommodation from the National Registry must complete a separate application and process. Information related to this process is available on the National Registry website at https://www.nremt.org/.

**U.S. Department of Veterans Affairs (VA) Benefits**

Students may be able to apply for VA benefits to pay for all or part of the cost of the EMT Program. For more information or to apply, contact the TEEX VA Office at 979-458-7796 or veteranservices@teex.tamu.edu.

**Injuries**

TEEX does not carry medical insurance on students, and the agency and/or instructors will not be responsible for any injuries or biohazard exposure sustained by students. Any/All instructional-related injury or exposure should be immediately reported to the instructor or EMS training manager.

**Official Notices and Bulletins**

Official communication with students will be via classroom announcements, postal mail, email, and phone. It is the student’s responsibility to determine if announcements were made during any absence. Mail, email, and phone communication will be based on information in the EMS Program student database. It is the student’s responsibility to ensure all information is up-to-date. Email will frequently be used for general and individual communication. Students are expected to check their email at least once within 24 hours prior to each scheduled classroom session.

**Harassment/Sexual Harassment**

TEEX, in accordance with applicable federal and state law, prohibits discrimination, including harassment, on the basis of race, color, sex, religion, national origin, age, disability, genetic information, veteran status, sexual orientation, or gender identity. Students who believe they have experienced harassment or discrimination are encouraged to contact the TEEX Title IX coordinator at 979-458-6821 or StudentServices@teex.tamu.edu.

**Participant Appeals/Complaint Process**

Appeals will be governed by the Participant Complaint and Appeal Process (13.99.99.NO.04) of the TEEX Standard Administrative Procedures:

1. Participants that wish to appeal a decision made by TEEX staff may do so by completing the report form at https://www.teex.org/complaint. Participants must submit their appeal within 30 calendar...
days of being notified of a decision. Participants can submit a complaint using the same form at any time.

2. Participants may file appeals under the following conditions:
   – A procedural error or omission occurred that significantly impacted the outcome
   – New evidence, that could have significantly impacted the outcome is now available
   – The sanctions issued were not appropriate

3. The review process for appeals is conducted by the TEEX Ethics and Compliance Office and will be completed within 20 business days of receipt of appeal. Additional time for the review may be warranted. Participants will be notified.

4. The TEEX chief operating officer will make the final decision of the appeal in collaboration with the TEEX Ethics and Compliance Office, unless a certification, licensing, or statutory authority requires a committee or another individual to make the decision.

5. Participants will be notified of the decision in writing by the TEEX Ethics and Compliance Office. This decision is final.


## Code of Ethics

As adopted by the National Association of Emergency Medical Technicians (NAEMT)

Professional status as a paramedic is maintained and enriched by the willingness of the individual practitioner to accept and fulfill obligations to society, other medical professionals, and the EMS profession. As a paramedic, I solemnly pledge myself to the following code of professional ethics:

- A fundamental responsibility of the paramedic is to conserve life, to alleviate suffering, to promote health, to do no harm, and to encourage the quality and equal availability of emergency medical care.
- The paramedic provides services based on human need, with respect for human dignity, unrestricted by consideration of nationality, race creed, color, or status.
- The paramedic does not use professional knowledge and skills in any enterprise detrimental to the public well-being.
- The paramedic respects and holds in confidence all information of a confidential nature obtained in the course of professional work unless required by law to divulge such information.
- The paramedic, as a citizen, understands and upholds the law and performs the duties of citizenship; as a professional, the paramedic has the never-ending responsibility to work with concerned citizens and other health care professionals in promoting a high standard of emergency medical care to all people.
- The paramedic must maintain professional competence and demonstrate concern for the competence of other members of the EMS health care team.
• A paramedic assumes responsibility in defining and upholding standards of professional practice and education.

• The paramedic assumes responsibility for individual professional actions and judgment, both in dependent and independent emergency functions, and knows and upholds the laws that affect the practice of the paramedic.

• A paramedic has the responsibility to be aware of and participate in matters of legislation affecting the EMS system.

• The paramedic, or groups of paramedics, who advertise professional service do so in conformity with the dignity of the profession.

• The paramedic has an obligation to protect the public by not delegating to a person less qualified any service that requires the professional competence of a paramedic.

• The paramedic will work harmoniously with and sustain confidence in paramedic associates, the nurses, the physicians, and other members of the EMS health care team.

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

Written by: Charles Gillespie M.D.

Adopted by: NAEMT, 1978

Source: https://www.naemt.org/about-ems/emt-oath
Emergency Medical Services (EMS) Program Personnel Contact List

Emergency Medical Services (EMS) Program Faculty and Staff

Carl Voskamp, EMS Program Training Manager  
Office: Brayton Fire Training Field, Building 101  
Office phone: (979) 428-2150  
email: carl.voskamp@teex.tamu.edu

J. D. Cochran, MD, EMS Program Medical Director  
email: cochransix@gmail.com

Vicki Kelley, Paramedic Instructor  
Office: Brayton Fire Training Field, Building 101  
Office phone: 979-845-6566  
email: vicki.kelley@teex.tamu.edu

Jolene Long, Clinical/Field Coordinator  
Office: Brayton Fire Training Field, Building 101  
Office phone: 979-862-6949  
email: jolene.long@teex.tamu.edu

Nick Sutton, Lab Coordinator and Skills Instructor  
Office: Brayton Fire Training Field, Building 101  
Office phone: 979-485-2115  
email: nick.sutton@teex.tamu.edu

Janet Colburn, Customer Service Associate  
Office: Brayton Fire Training Field, Building 101  
Office phone: 979-458-2998  
email: janet.colburn@teex.tamu.edu

Texas A&M Engineering Extension Service/Emergency Services Training Institute (TEEX/ESTI) Administration

Paul Siebert, Public Sector Program Director  
Office: Brayton Fire Training Field, Building #59  
Office phone: 979-845-5562  
email: paul.siebert@teex.tamu.edu
Acknowledgment of Receipt of the Student Handbook

I have received a copy of the TEEX/ESTI Paramedic Program Student Handbook.
I have read, understand, and agree to abide by the requirements and policies stated within.

Printed Student Name

________________________________________________________________________

Student Signature Date
Contacts

• **Infrastructure & Safety**
  800.723.3811
  ITSI@teex.tamu.edu
  – Environmental/Irrigation
  – Water/Wastewater
  – Safety and Health
  – Transportation
  – Electric Power
  – Heavy Equipment
  – Telecommunications
  – Confined Space Operations

• **Law Enforcement & Security**
  800.423.8433
  Law@teex.tamu.edu
  – Law Enforcement Extension
  – Forensic Science Academy
  – Basic Police Academy
  – Emergency Driving
  – Private Security
  – Explosives
  – Corrections Academy
  – Infrastructure Protection
  – Accident Reconstruction

• **Fire & Rescue**
  866.878.8900
  ESTI@teex.tamu.edu
  – Industrial/Municipal Fire Fighting
  – Incident Management
  – Hazardous Materials
  – Rescue Training
  – Leadership
  – Technical Assistance
  – Fire Recruit Academy
  – Emergency Medical Services

• **Economic & Workforce Development**
  800.541.7149
  KE@teex.tamu.edu
  – Product Development and Testing
  – Therapeutics Manufacturing
  – Economic Development
  – Cybersecurity
  – Market Intelligence
  – Manufacturing Assistance
  – Training Software Products

• **Mailing Address • Headquarters**
  Texas A&M Engineering Extension Service
  P.O. Box 40006
  College Station, TX 77842-4006

  Texas A&M Engineering Extension Service
  200 Technology Way
  College Station, TX 77845-3424

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  877.833.9638

• **Phone**
  979.458.6805

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  979.458.6822