

**EMC 130C Course Outline as of Fall 2012****CATALOG INFORMATION**

Dept and Nbr: EMC 130C Title: PARAMEDIC III

Full Title: Paramedic III -Pediatric Emergencies

Last Reviewed: 2/12/2018

| Units   |      | Course Hours per Week |      | Nbr of Weeks | Course Hours Total |       |
|---------|------|-----------------------|------|--------------|--------------------|-------|
| Maximum | 2.00 | Lecture Scheduled     | 1.50 | 17.5         | Lecture Scheduled  | 26.25 |
| Minimum | 2.00 | Lab Scheduled         | 1.50 | 4            | Lab Scheduled      | 26.25 |
|         |      | Contact DHR           | 0    |              | Contact DHR        | 0     |
|         |      | Contact Total         | 3.00 |              | Contact Total      | 52.50 |
|         |      | Non-contact DHR       | 0    |              | Non-contact DHR    | 0     |

Total Out of Class Hours: 52.50

Total Student Learning Hours: 105.00

Title 5 Category: AA Degree Applicable

Grading: Grade Only

Repeatability: 00 - Two Repeats if Grade was D, F, NC, or NP

Also Listed As:

Formerly:

**Catalog Description:**

Third didactic course in a series leading to the completion of paramedic didactic training. Emphasis is on assessment and treatment of the pediatric patient in the pre-hospital environment. Meets standards for both the California Health and Safety Code, Title 22 and the National Emergency Medical Services Education Standards (NEMSES) as published by U.S. Department of Transportation (DOT).

**Prerequisites/Corequisites:**

Concurrent Enrollment in EMC 130A, EMC 130B, 130D and EMC131A (Students must successfully complete each prior course in the sequence to avoid having to repeat the entire sequence.)

**Recommended Preparation:****Limits on Enrollment:**

Enrollment in Paramedic Academy

**Schedule of Classes Information:**

Description: Third didactic course in a series leading to the completion of paramedic didactic training. Emphasis is on assessment and treatment of the pediatric patient in the pre-hospital

environment. Meets standards for both the California Health and Safety Code, Title 22 and the National Emergency Medical Services Education Standards (NEMSES) as published by U.S. Department of Transportation (DOT). (Grade Only)

Prerequisites/Corequisites: Concurrent Enrollment in EMC 130A, EMC 130B, 130D and EMC131A (Students must successfully complete each prior course in the sequence to avoid having to repeat the entire sequence.)

Recommended:

Limits on Enrollment: Enrollment in Paramedic Academy

Transfer Credit:

Repeatability: Two Repeats if Grade was D, F, NC, or NP

### **ARTICULATION, MAJOR, and CERTIFICATION INFORMATION:**

|                      |                      |            |           |
|----------------------|----------------------|------------|-----------|
| <b>AS Degree:</b>    | <b>Area</b>          | Effective: | Inactive: |
| <b>CSU GE:</b>       | <b>Transfer Area</b> | Effective: | Inactive: |
| <b>IGETC:</b>        | <b>Transfer Area</b> | Effective: | Inactive: |
| <b>CSU Transfer:</b> |                      | Effective: | Inactive: |
| <b>UC Transfer:</b>  |                      | Effective: | Inactive: |

**CID:**

**Certificate/Major Applicable:**

Both Certificate and Major Applicable

### **COURSE CONTENT**

**Outcomes and Objectives:**

Upon completion of the course, students will be able to:

1. Discuss anatomical, physiological and pathophysiological variations between the adult and pediatric patient.
2. Identify specific growth and development milestones of the various age groups of the pediatric population as they relate to illness or injury.
3. Differentiate the pathophysiological principles and assessment findings unique to the pediatric patient in order to formulate a field impression.
4. Implement a treatment plan for management of an ill or injured pediatric patient.
5. Discuss unique assessment and treatment for children with special needs.

**Topics and Scope:**

- I. Anatomy and Physiology Unique to Pediatric Population
  - a. Airway
  - b. Vascular access
  - c. Head and spine
- II. Assessment of pediatric patient
  - a. Growth and development stages
  - b. Common response by parents
  - c. Techniques unique to children
  - d. Differential diagnoses

### III. Pathophysiology and Patient Management

- a. Respiratory illnesses
- b. Cardiovascular illness/arrest
- c. Shock states
- d. Altered mental status
- e. Neurological emergencies
- f. Trauma
- g. Pediatric Advanced Life Support (PALS)

### IV. Children With Special Health Needs

- a. Child abuse and neglect
- b. Sudden Infant Death Syndrome (SIDS)
- c. Technology assisted

#### **Assignment:**

1. Reading 50-80 pages per week
2. Memorize 10-15 pediatric treatment protocols
3. Memorization of 10-15 pediatric skills
4. 3-6 quizzes
5. 5-10 group pediatric scenarios
6. 5-10 Patient Care Reports
7. 1-3 written examination
8. PALS test
9. 1-3 skills performance examination
10. Title 22 Mandated attendance

#### **Methods of Evaluation/Basis of Grade:**

**Writing:** Assessment tools that demonstrate writing skills and/or require students to select, organize and explain ideas in writing.

Technical report writing ( patient care reports)

Writing  
5 - 10%

**Problem Solving:** Assessment tools, other than exams, that demonstrate competence in computational or non-computational problem solving skills.

Group scenario team leadership demonstration

Problem solving  
10 - 20%

**Skill Demonstrations:** All skill-based and physical demonstrations used for assessment purposes including skill performance exams.

Skills - pediatric management

Skill Demonstrations  
30 - 40%

**Exams:** All forms of formal testing, other than skill performance exams.

Quizzes and exams: short answer, multiple choice

Exams  
30 - 40%

**Other:** Includes any assessment tools that do not logically fit into the above categories.

Attendance and participation

Other Category  
15 - 25%

**Representative Textbooks and Materials:**

Instructor prepared materials

Prehospital Emergency Pharmacology (6th). B. Bledsoe. Prentice Hall: 2005

Paramedic Care -5 (3rd). B. Bledsoe. Prentice Hall: 2008

Drug Reference for EMS Providers (3rd). R. Beck. Delmar: 2003

Pediatric Advanced Life Support, American Heart Association: 2011