

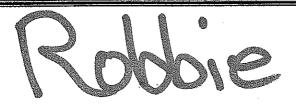
Southwestern
Oregon
Community
College

Emergency Medical Technician Program Self-Study Report 2004

PREPARED BY:

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PUBLIC SAFETY TRAINING AND EDUCATION DEPARTMENT

SITE VISIT - MARCH 29-31, 2004



Southwestern Oregon Community College EMT Program

A. Program Data

Name of Institution: Southwestern Oregon Community College

1988 Newmark

Coos Bay, Oregon 97420

The College - Mission

The mission of Southwestern Oregon Community College is to provide quality education that helps students achieve their goals. Our programs prepare people to be employable, value life-long learning, and function as good citizens in a rapidly changing world. To accomplish this mission, the College will:

- Maintain high standards of excellence in instructional programs and student services
- Deliver real-world education and training essential for a highly skilled workforce
- Encourage diversity, collegiality and professionalism
- Collaborate with businesses, agencies, schools, and universities to create mutually beneficial partnerships for economic, social, and educational development
- Promote technological competence to compete in a global community
- · Provide multiple avenues of access to educational opportunities for all students
- Enhance the cultural awareness of students and the community at large (2000)

The Board Vision

The College district provides comprehensive quality education programs and services that are accessible and responsive to diverse student and community populations. Because of Southwestern, South Coast citizens will:

- Be involved in society's work
- Value lifelong learning
- Be linked with regional, national, and global information systems
- Be engaged in cultural enrichment
- Have an employable adult population supported by a thriving economic and social environment

The Board Philosophy

The Southwestern Board of Education will govern Southwestern Oregon Community College with a strategic perspective, while leading and improving its ability to define institutional values and vision.

Report Prepared by:

Paul Reynolds, Coordinator

Robbie Kirch, Secretary

Public Safety Training and Education Department

Southwestern Oregon Community College

541-888-7432

Accreditation:

Northwest Association of Schools and Colleges

Program Title:

Emergency Medical Technician Certificate Program

EMT Level:

EMT-Basic and EMT-Intermediate

Type of Certificate:

Program completers receive a certificate

Related Programs:

Southwestern Oregon Community College offers the following

allied health programs:

Nursing, Basic Nursing Assistant, Pharmacy Technician, Surgical

Technology, Rural Health Aid

Program Affiliates:

	Main Campus	Extended Learning	Curry Campus (North)	Curry Campus (South)
Medical Director	Barbara Gabert, M.D. Emergency Room Physician Bay Area Hospital 1755 Thompson Road Coos Bay 97420 541-269-8111	John Crocker, M.D. Dunes Family Health Care 620 Ranch Road Reedsport 97467 541-271-2163 James Sinnott, M.D Coquille Valley Hospital 790 East 5th Coquille OR 97423 541-396-3111	Mark Pastemak, M.D. Coquille Valley Hospital 940 East 5 th Coquille OR 97423 541-396-3101	Maciej Druzdzel M.D. 94180 Second Street Gold Beach 97444 541-247-2171
Clinical Affiliate	Bay Area Hospital 1775 Thompson Road Coos Bay 97420 541-269-8111 Diana Wali	Lower Umpqua Hospital 600 Ranch Road Reedsport 97467 541-271-2171 Kevin Van Syk	Curry General	Sutter Coast 800 E Washington Crescent City CA 95531 707-464-8511 Carol Peete
Ambulance Affiliate	Bay Cities Ambulance 3505 SE Ocean Blvd Coos Bay 97420 541-269-1155 Tim Novotny	Lower Umpqua Ambulance 600 Ranch Road Reedsport 97467 541-271-2171 Kevin Van Syk	Port Orford Ambulance 552 Nineteenth St Port Orford 97465 541-332-0384 Gayle Wilcox	Cal-Ore Life Flight Willow & Spruce Brookings 97415 542-469-7911 Ken Wood
	Coquille Fire & Rescue 3 rd & Alder Coquille OR 97423 541-396-2232 Shawn March	Myrtle Point Ambulance 424 5 th Myrtle Point OR 97458 Cheryl Houston		

Table 1

Number of students enrolled in the program:

	EMT Basic	State Certification	EMT Intermediate	State Certification	Cour Basic	ses Offered Intermediate	Certificate Awarded
1999-00	43	36	24	23	4	2	6
2000-01	29	27	10	10	2	1	2
2001-02	53	48	7	7	4	1	4
2002-03	36	17	8	8	2	1	0
2003-04	TBA	ТВА	24	ТВА	3	3	ТВА

Table 2

Program Articulation:

There are currently no articulation agreements with regional high schools specific to the EMT Program.

Program Overview:

The Emergency Medical Technician (EMT) Program at the college is limited to courses at the EMT-Basic and EMT-Intermediate level. No paramedic level courses are offered as part of the overall program. The statewide EMT/Certificate associate degree was implemented in the Fall of 1994. Special offering courses related to specific certifications or aspects of emergency medical services may be offered through the college if there is local demand for a course.

The current program coordinator, Paul Reynolds, has coordinated the program since July, 1997. In addition, he coordinates the college's Fire Science degree program, the Reserve Officers Training Academy, and career development for fire, criminal justice and EMS agencies in the college district.

Due to the size of the college and limitations in financial resources, personnel, and training site resources, the college will offer only the certificate level of the statewide EMT program. The college intends to limit EMT certification courses to the Basic and Intermediate levels for the time being.

Courses that are part of the EMT Certificate Program are offered at the college, however, certification courses are made available throughout the college district as demand dictates. Courses are presented in outlying areas of Coos county as well as in Curry and Douglas counties. The program coordinator and program secretary work in conjunction with Peggy Georgen, Associate Dean, who coordinates courses offered in Curry county. Although courses are being offered in multiple locations, the positive working relationship among those directly involved in coordinating EMT courses is commendable.

Up to six EMT certification courses at different levels may be offered in a given year in the college service area. Currently there are ten individuals employed by the college who are eligible to serve in the capacity of Course Director for EMT courses. In addition, several people throughout the region assist instructors as lab assistants. An Equipment and Staffing Aide whose duties include maintaining equipment for the EMT program and other first aid and health related courses is also part of the program.

B. Instructional Program

The EMT Program at Southwestern is comprised of the following courses:

		· · · · · · · · · · · · · · · · · · ·		
Course Number	HE*257A (HE*928A)	HE*257B (HE*928B)	HE*258A (HE*931A)	HE*258B (HE*931B)
Course Title	EMT-B, Pt A	EMT-B, Pt B	EMT-I, Pt A	EMT-I, Pt B
Credit Hours	5	5	4.5	4.5
Lecture Hours/Week	4	4	3.8	3.8
Lab Hours/Week	3	3	2.2	2.2
Number of Weeks	11	11	11	11
Clinical Observation Hours	N/A	10	N/A	N/A
Ambulance Experience	N/A	5 runs	N/A	N/A

Table 3

Didactic Instruction

The EMT-Basic courses offered by Southwestern adhere to the prescribed curriculum of the U.S. Department of Transportation and OHD-EMS. The EMT-Basic course of study is modeled after the American Association of Orthopaedic Surgeon's "Emergency Care and Transportation of the Sick and Injured." Instructional materials used in EMT-Basic courses center on the instructional package that has been developed for the book by the publishers. In addition, this course incorporates AED/SAD training in a manner consistent with the OHD-EMS prescribed curriculum covering this topic.

The EMT-Intermediate course of study is modeled after the Course Curriculum and Reference Guide by OHD-EMS and the comprehensive curriculum and course manual that was developed by Kenneth Ochsner for the Oregon EMT Rural Education Partnership. The Mosby text, "EMT-Intermediate" and the Blue Mountain Commmunity College EMT-Intermediate Student Workbook are also used.

The EMT Certification Program is consistent with the statewide EMT Certificate/Associate degree program. A copy of the program, listing required courses and credit hours, with course statements for all courses that comprise the program are presented in Appendix A. A sample course outline is presented in Appendix B. Additional course outlines will be available to accreditation team members during the site visit to the college. A sample syllabus is presented in Appendix C.

Clinical Resources:

Students are placed for clinical observations and field experiences at the program affiliates listed in Table 1, Page 3.

Goals and objectives have been written for each clinical rotation site, please see Appendix D. These are provided to the students and the supervisory staff at the site. In addition the program secretary meets with each preceptor and reviews goals, objectives, evaluation forms, expectations and limitations regarding the rotation. The student is responsible for bringing the evaluation forms and objectives to their clinical and returning them to the instructor at the next class period.

Currently the clinical resources are adequate to support the number of students enrolled. Students have appropriate access to patients at each clinical affiliation site. Please see Appendix E for a copy of the affiliation agreement between the college and Bay Area Hospital. Other agreements will be available to accreditation team members during the site visit to the college. Agreements have put in place between the ambulance service agencies and the college that address the placement of EMT students at ambulance sites. Please see Appendix F for a copy of the agreement between the college and Bay Cities Ambulance. Other agreements will be available to accreditation team members during the site visit to the college.

C. Staffing:

There is one coordinator and one secretary employed in the Public Safety Training and Education Department. This department encompasses the Fire Science degree program, the EMT certificate program, the Reserve Officer Training Program, and career development for fire, EMS, and criminal justice agencies in the school district

Ten part-time instructors are currently employed in the EMT-Program as qualified lead course directors. Additional instructors are utilized to teach non-certification core courses that are part of the EMT Certificate Program. The instructors teaching EMT-Basic and EMT-Intermediate courses either teach on the college campus or in outlying areas served by the college. All instructors are actively involved with ambulance service providers in the region. Each instructor qualified as a course

director provides documentation of their qualifications at the time that the "Application to Conduct a Course" is sent to OHD. Copies of this documentation are kept on file with the program secretary. A list of staff members along with resumes involved with the program are presented in Appendix G. The program coordinator is responsible for the administration and supervision of the EMT program. The program secretary is responsible for the organization, scheduling, evaluation and acquisition of resources. Their individual job descriptions are presented in Appendix H.

Lab assistants for EMT courses vary with each term; consequently, a list of current assistants and their qualifications cannot be provided. Based on projected enrollment in EMT courses, course directors assume the responsibility for selecting qualified individuals to serve as course lab assistants and submit recommendations to the program coordinator. Course instructors may use guest lecturers and are responsible for retaining any documentation pertaining to topics presented by guest lecturers and their qualifications.

Our school district encompasses an extensive range of area. We have found it to be more effective to have a Medical Director for each site that a course is put on. The Medical Directors for each area are listed in Table 1, on Page 3. The Medical Director is approved for their role through OHD/EMS each time a EMT-Basic or Intermediate class is conducted.

The Medical Director's role is to provide advice to course directors and to the program coordinator regarding the medical aspects of courses and the EMT Certificate Program. This may be accomplished through direct face-to-face meetings, through correspondence, or through meetings of the EMT Program Advisory Committee. The involvement of the Medical Directors in the EMT Certificate Program has been limited. As program documentation is developed through the program coordinator's office, information will be made more available to the Medical Directors.

Mandatory certifications for lead course directors, such as the OHD/EMS "Course Director Update," is funded through the EMT budget. Transportation, meals, and lodging are provided.

D. Financial Resources

The EMT program operates a separate and distinct budget. The 2003-2004 program budget is included in Appendix I of this report. The budget is limited to the basic needs of the EMT program. Line items relate to personnel costs and operational expenditures, including those related to expendable equipment and instructional supplies, instructional resources, and program related travel.

Other funds may be available for the EMT program. For instance, capital equipment is typically obtained, in competition with other programs at the college, using available state and federal grant monies. There is no long-term budget for equipment. Limited staff development funds are carried in a separate account at the college and may be obtained through a competitive application process.

Students are charged a \$15.00 per credit fee to cover the costs for expendable class supplies. In addition the college has an annual line item budget of \$6,600 to purchase new equipment for the main campus, assist in purchasing equipment for off

campus classes, and to cover costs of running the program. A separate account is maintained for costs associated with State certification testing at the EMT-Basic and EMT-Intermediate level.

A variety of financial aid programs are available through the college to students pursuing the EMT Certificate Program. A unique aspect of the EMT program is that tuition is waived for EMT volunteers affiliated with public EMS agencies.

E. Facilities

Classrooms and Storage

All college-based EMT courses are offered in room number 12 of Sumner Hall. This modern classroom is an excellent facility for EMT courses. The classroom has sufficient space to conduct lectures and practical skill sessions for a maximum 35 students enrolled in courses, has in-room storage for EMT training aids and equipment and ready access to restroom facilities and running water. The same building houses the college's nursing program. Through the cooperation of the nursing program staff, additional equipment and lab space can be made available to assist EMT course instructors.

The college does have a bio-hazard disposal plan. As requested in the Accreditation Manual, a copy of this plan is presented in Appendix J.

Outreach courses utilize facilities that are available at locations where courses are to be offered. These facilities may be fire stations, ambulance facilities, community buildings, or high school classrooms throughout the college service area. During the 2003/2004 school year outreach classes were/are at Lower Umpqua Hospital in Reedsport, Coquille Fire & Rescue, Port Orford Ambulance, Port Orford Funeral Services Building, and Cal-OR Life Flight in Brookings. Outreach instructors will meet with accreditation team members during the site visit to discuss facilities and other matters specific to course offerings in outreach locations.

Faculty Office Space

The program coordinator maintains an office in the Fire Tower Office building. The location is across the campus from where EMT courses are conducted. The location of the office does not provide ready access to EMT equipment but it has not proven to cause serious identification of program coordinator, program secretary and program.

A designated preparation area and office for on campus part-time instructors specifically involved in the EMT program is located in the Fire Tower Office building. Lesson plans and classroom records are stored in the Fire Tower Office building. A conference/meeting room is available in Sumner Hall that can be used for instructor-student conferences provided the room is not in use by the nursing program.

Documents relating to compliance of college facilities with OR-OSHA standards for safety will be available to accreditation team members for review during the site visit to the college.

Library facilities at the college are spread over two floors of Tioga Hall. The main holdings and circulation area are on the 2nd floor. Periodicals, audio and video collections, and viewing areas are on the 3rd floor. Study areas for students are dispersed throughout both floors of the library as well on the second floor of the Performing Arts Center.

The library has very limited resources for the acquisition of new books; consequently, the EMT selection is limited. Many of the holdings in the library are dated; limited resources restrict the extent to which updating of materials can be done. Although book titles and periodicals specific to the EMT program are limited, nursing titles are better maintained and often provide students with related reference material. A copy of book titles and periodicals currently available is presented in Appendix K.

Due to technological developments, the library has been focusing more on technology to provide information to students and staff at the college. Online searches for information can be done on the 2nd floor and through the Computer Lab/Learning Hub on the 4th floor. Library holdings can easily be found using the Southwestern web site www.socc.edu.

Interlibrary loan services are provided by the library. Students taking EMT courses at outreach locations do have access to library services at the college through the Coos Cooperative Library Service.

Audio/visual equipment and services to support classroom activities at the college are very good. Equipment is kept in good repair to the extent possible given limitations on current resources. All audio/visual equipment is maintained and made available through the staff of Media Services on the ground floor of Tioga Hall. Instructors may reserve audio/visual equipment in advance of class times. Overhead projectors are kept in each classroom. The equipment inventory insures that there is no difficulty for instructors to obtain needed equipment provided procedures to request equipment are adhered to.

In addition to providing equipment to classrooms on the campus, Media Services provides equipment for use at off-campus course locations. Due to time and distance, however, off campus EMT course instructors generally arrange their own media equipment needs.

The college does maintain an extensive videotape library including many titles in the health occupations areas. A copy of video holdings in these areas is presented in Appendix L. Video tapes are directly accessible to campus-based instructors. Off-campus instructors may request tapes for use in their courses through a courier service available through the areas educational service districts. In addition to recently purchased videos through the EMT program, many of the video tapes purchased through the Fire Science program are available for EMT course instructors. All EMS and Fire Science videos are kept in the Fire Tower Office building.

G. Equipment

Equipment needed for EMT courses is kept in two locations: in Sumner Hall, and in the Fire Tower Building where CPR manikins are stored to make them available for first aid and CPR classes. An inventory of EMT equipment currently available for use with campus-based courses will be available for review by accreditation team members during the site visit to the college. The equipment inventory does not take into consideration the availability of equipment belonging to the nursing program. Equipment from the nursing program is often made available and includes training manikins, stump wrapping manikins, and other specialized equipment.

Approximately \$6,000.00 in new equipment has been purchased since the beginning of the 2003-2004 academic year. Two new Lifepak 500 AED Trainers, one Airway Management Trainer and one Moulage kit are some other newly purchased equipment.

Off-campus EMT courses do not generally make use of campus-based equipment although items are made available to instructors needing them. Most courses taught off-campus make use of equipment available through fire or ambulance agencies at the location where courses are offered. Members of the accreditation team will be able to meet with off-campus instructors as part of the agenda for the site visit and can discuss off-campus equipment availability with them at that time.

Among the part-time staff working with the EMT program is a part-time Equipment and Staffing Aide whose duties are to maintain the EMT equipment inventory and repair equipment as needed. The person in this position reports to the Director of Health Occupations although the aide works closely with the EMT program coordinator and secretary.

The long-term goals for the acquisition of equipment for EMT courses is to obtain sufficient equipment to: a) equip State certification exam practical skill stations and be able to open additional skills stations as needed, b) enable each lab instructor in a EMT course to have the equipment necessary to conduct a lab session that focuses on the practical skill being presented in a course, c) upgrade and keep equipment in top condition, and d) have sufficient equipment that items can be made available to outreach locations on demand. A copy of the current long term plan is presented in Appendix M.

H. Support Services

The Educational Support Services component of the college provides services to help students be successful, and provides experiences to enrich students' educational experiences. Through the offices in this area, students are tested to insure appropriate placement in courses, are provided orientation sessions covering advising and registration procedures, costs, and general assistance that is available at the college.

Library

Library facilities, holdings, and accessibility have been discussed previously in this report. Please refer to section F - Instructional Aids, Supplies, and Materials.

Advising/Counseling

Advising services are available to all EMT students upon request. The college utilizes a faculty advising system, however, without full-time EMT instructional staff, EMT students are not advised by faculty in the area. The EMT program coordinator handles the majority of EMT student advising.

Educational Support Services is located in Stensland Hall. It is arranged to include a reception counter, offices of counselors, a testing area, and a career information center. College catalogs, career materials, and a computerized career information system are available. Full-time counselors split responsibilities and specialize to some extent. For instance, individual counselors will focus on high school relations, disabled and special population students, placement testing, and new student orientation. Special arrangements can be made for students who are either off campus or can only meet during evening hours.

A time has been established on the site visit agenda for the members of the accreditation team to meet with counseling staff and discuss matters of advising, placement testing, and related concerns.

Tutoring

Tutoring services are provided by the instructional component of the college. Initially, students are placed into courses according to their academic skill level as determined from placement test scores. Placement and admission standards for EMT courses are required for the EMT-Basic class. This requirement has resulted in some students seeking EMT classes enrolling in remedial study courses prior to being allowed to register for EMT courses.

Students needing assistance in developing their basic skills levels receive outstanding support. Courses are offered in math, reading, study skills, and student success. General tutoring in a variety of subject areas is available through the Adult Learning Skills Program. Programs available include a supplemental instruction program and a variety of services for special populations students. Services are provided on and off-campus.

The tutoring program at the college exists to provide all students with the help they need to complete courses successfully. The Learning Resource Center exists in Randolph Hall and offers assistance through sequential and structured review, alternative explanations, immediate and corrective feedback, and encouragement and motivation. The center is staffed by students who have successfully completed the courses they are tutoring and who have been recommended by course instructors.

Since EMT courses are offered on and off-campus by part-time instructors, arrangements for student tutors are not consistently made. Instructors often have donated extra time to work with students needing assistance in developing academic and skill levels. The EMT program at the college has a high level of participation by volunteers; consequently, graduates of courses working in agencies provide considerable assistance to students independent of college efforts.

Faye Mellius Linn Berton

I. Admission Policies and Procedures

A formalized application and monitoring process was implemented in the fall 1994 term. All applicants for EMT-B and EMT-I courses are required to complete a comprehensive application for the college. The EMT application addresses entrance criteria for EMT courses, incorporates documentation for required immunizations, and provides a mechanism for insuring that students have necessary insurance coverage. A copy of the EMT Course Enrollment and Prerequisite Verification form for EMT-Basic is included in Appendix N of this report.

Applications for courses are available through the Student First Stop Center and through the program coordinator's office. Students will be prevented from registering for an EMT course until applications are completed and there are no deficiencies of documentation. Students are accepted into courses on a first come, first served basis. No group of students applying for admission to courses is given preferential treatment.

Consistent with standards at community colleges that are part of the statewide EMT certificate/associate degree program, the college has implemented academic entrance standards. All applicants for EMT-Basic courses need to complete the ASSET placement tests used by the college for placement purposes. The college placement test is used for advising purposes. Students scoring below the minimum levels are referred to the program coordinator for approval to register for EMT-B. Students scoring lower than the levels of college level reading, college level writing, and elementary algebra are advised to consider enrolling in courses that will build their skills and improve their chances of succeeding in the EMT-Basic course.

There is no written recruitment strategy/plan for the EMT program. New students are obtained as part of the general marketing of the college and through visits by counselors, financial aid staff, and admissions staff to high schools in the region. Students are also obtained through the Fire Science program and from emergency agencies in the school district. The program coordinator responds to inquires from potential students directly.

Most information about activities related to the EMT program, including scheduling, registration information, and program changes is provided through direct mailing of information from the program coordinator's office. The office maintains a mailing list of all EMS agencies and EMTs, by level of certification, throughout the region served by the college in order to facilitate program communications.

J. Program Information

Program information can be obtained through the College Catalog available at www.socc.edu and through the EMT Student Handbook. A copy of the College Catalog will be available to accreditation team members during the site visit to the college. A complete EMT Student Handbook is included in Appendix O. Critical information about admissions criteria for EMT courses is contained on the EMT course application form which must be completed in order for a student to register for EMT classes.

Program Descriptions

Outlines for all courses are maintained in the Office of Instruction and are available to students and the public to review. In addition, outlines of core EMT courses are available in the program coordinator's office and are also available online at www.socc.edu. A sample course outline is presented in Appendix B. Additional course outlines will be available to accreditation team members during the site visit to the college.

OAP 581 049 0020

Equal Opportunity

The college does have an EEO policy and an ADA policy. These policies will be available to accreditation team members during the site visit to the college.

Student Evaluation

Detailed records of content and logistics of student evaluation by instructors in EMT courses is not maintained in the program coordinator's office. Course instructors are responsible for the evaluation of students and use a combination of written exams and assessment of practical skills for students as part of their evaluation. Documentation of student progress is maintained by each instructor individually.

Information on students' evaluations of courses and the EMT program is discussed in Section N, Program and Course Evaluation, of this report.

K. Job Search and Placement

The college Career/Placement Office concentrates on part-time job placement school terms as a service to students. Due to limited resources along the same limited to during school terms as a service to students. Due to limited resources, placement services are limited to providing career information, and posting position announcements received from employers. Most information offered EMT students is through instructors who provide information on position availability and career development as part of their classes.

K. Advisory Committee

The EMT program at the college does have an active advisory committee that is comprised of private and public sector emergency services agencies including ambulance services, hospitals, and fire services. The first meeting of the school year the previous year's members are reviewed. Many of the same individuals remain as a vital part of this group. New members are selected by contacting area agencies and asking them if they have an individual who would benefit themselves as well as their agency by being a member A listing of the members of the Advisory Committee is presented in Appendix P of this report.

The Advisory Committee meets three times throughout the academic year and provides advice related to scheduling of courses, equipment needs, and program related issues. The Committee members, individually and collectively, provide on-going feedback regarding strengths, weaknesses, and general perceptions of program activities. Members are often approached individually and do contact the program coordinator directly when they have concerns.

Minutes of the last three meetings are presented in Appendix Q. The program secretary is charged with recording of the minutes and approval is given at the following meeting.

M. Safety

The college does have an up-to-date safety policy in effect which will be available to accreditation team members during the site visit to the college. The college Safety Committee is responsible for monitoring campus safety and insuring that provisions of the safety policy are adhered to on a day-to-day basis. The administrator responsible for monitoring the Safety Committee is Sheldon Meyer, Dean of Administrative Services. The Committee conducts inspections of college facilities, reports deficiencies, and initiates corrective measures. A current safety inspection document is presented in Appendix R. Safety concerns can be reported directly to the Committee.

Liability insurance for students is provided through emergency services agencies if students are volunteers affiliated with an agency. Students not affiliated with an agency are covered under insurance policies maintained by the college. The EMT course application requests information regarding students' agency affiliation and insurance coverage. A copy of the college certificates of insurance is presented in Appendix S.

N. Student Records

All records of students are securely maintained in the Student First Stop Center at the college. Admission into the EMT Program and courses is accomplished through a special application (discussed previously in this report). Students without completed application materials are flagged and prevented from registering for EMT courses until they have completed the application process.

Students' grades and transcripts that document completion of courses and completion of the EMT Program are also maintained in the Student First Stop Center. This office maintains a coherent and accurate student record system and data base that is in compliance with laws regarding confidentiality of student records such as the Family Education Rights and Privacy Act, AACRAO guidelines, and other federal and state guidelines.

Attendance records of students, evidence of competencies attained by students throughout the EMT program, and evidence of satisfactory completion of all didactic, clinical, and field internships that are part of the program may be maintained by course instructors. Satisfactory attendance and attainment of competencies by students have been regarded as implicit in the students' receiving passing grades for courses that are part of the program.

Further information on practices of the Student First Stop Center will be provided by representatives of the office who will meet with the accreditation team during the site visit.

O. Program and Course Evaluation

A college-wide self-study report evaluating all components of the college was completed in April, 2002. The college has completed the accreditation process and received accreditation through the Northwest Association of Schools and Colleges. A copy of the self-study report and accreditation report will be available to accreditation team members during the site visit to the college.

Review of the EMT instructional program is done on an ongoing basis through the combined efforts of the Office of Instruction and the program coordinator. Follow up surveys of all students, employers, clinical and field experience agencies are completed each year. These surveys do not provide sufficient information about the EMT certificate program, however, since there are so few graduates of the program.

On and off-campus EMT courses are evaluated through student surveys in classes. Complaints by students about the program or instructors are addressed in a manner consistent with the student grievance procedure at the college. This procedure will be available to accreditation team members during the site visit to the college. A copy of the colleges part-time instructor evaluation policy and student evaluation forms are presented in Appendix T. Copies of the evaluations sent out after completion of a class are presented in Appendix U.

The program coordinator is able to regularly assess the overall organization and administration of the EMT program as a result of continuing dialog with outreach coordinators, feedback from members of the Advisory Committee, and interaction with other program coordinators in the State. In addition, the program coordinator and program secretary regularly seeks feedback from the Oregon Health Division.

Appendix A

1	Southwestern Orec	on Commur	ity College				Curriculum Checklist
ĺ	Term G	Course	EMERGENCY MEDICAL	c	Terms	PREREQUISITE	S OR PLACEMENT

Term Comp.	G R A D	Course No.	EMERGENCY MEDICAL TECHNICIAN CERTIFICATE 1999-2000	C R E O	Terms Coffered F W S		R Terms			PREREQUISITES OR PLACEMENT TEST SCORES & NOTES
	E		1335-2000	+			s	Instructor Consent always overrides prerequisites		
		FIRST TERM								
		Bl231	Anatomy and Physiology	4	x			Chemistry		
		HE942	Intro to Emergency Medical Services	3	×					
		МТН70	Elementary Algebra	4	х	x	×	MTH20 or MTH30 w/B		
		OA2221	Medical Terminology	3	x	Π				
		WR121	English Composition	3	х	х	х.	WR90 or Placement Test Score		
		SECONO TER	Н							
		BI232	Anatomy and Physiology	4		х				
		HE257A	EMT Basic - Part A	5		х				
		HE944	Emergency Communication/Patient Transport	3		х				
			Social Science Course	3	х	X	х			
		THIRD TERM								
		BI233	Anatomy and Physiology	4			х			
		CJ203	Crisis Intervention	3			×			
		HE257B	EMT Basic - Part B	5			×			
VK: May 10, 1000		HE943	EMT Rescue	3			х	·		

KK: May 19, 1999

NOTE: Courses may be offered in terms other than those specified above. This is only a guideline. Contact your advisor for the most accurate term offerings.

Course Descriptions of Required Classes for the Emergency Medical Technician Certificate Program

Emergency Medical Requirements

<u>BI 231 - Human Anatomy and Physiology</u> - 3 Credits - 3 Lecture Hrs/Wk A review of inorganic and organic chemistry including discussion of metabolic pathways. In addition, cell structure, tissues, and the integumentary, skeletal, and muscular systems are considered.

<u>BI 232 - Human Anatomy and Physiology</u> - 3 Credits - 3 Lecture Hrs/Wk A detailed study of the anatomy and physiology of the respiratory, digestive, urinary, endocrine, and reproductive systems are included.

<u>BI 233 - Human Anatomy and Physiology</u> - 3 Credits - 3 Lecture Hrs/Wk A detailed study of the anatomy and physiology of the cardiovascular, lymphatic, nervous systems, and special senses are included.

<u>HE 257A/B - Enhanced Emergency Medical Technician-Basic A/B</u> - 10 Credits - (80 Lecture Hours - 60 Lab Hours - 10 Field Study Hours Total)

This course prepares individuals for certification in Oregon as an Emergency Medical Technician-Basic. Develops skills in recognition of symptoms of illness and injuries and proper procedures of emergency care.

Prerequisites: Students are required to complete a special application and meet minimum entrance requirements to register for the course. Application information can be obtained through the EMT Program Director's Office or the Student Services Office.

<u>HE 942 - Introduction To Emergency Medical Services</u> - 3 Credits - 3 Lecture Hrs/Wk This course covers the role and responsibilities of the paramedic, emergency medical services systems, medical-legal considerations, major incident response, hazardous materials awareness and stress management.

HE 943 - Emergency Medical Technology Rescue - 3 Credits - 3 Lecture Hrs/Wk This course covers elementary procedures of rescue practices, systems, components, support, and control of rescue operations including ladder procedures and basic rescue tools of patient extraction, emphasizing application to traffic accidents, as required for paramedic certification.

<u>HE 944 - Emergency Communication and Patient Transport - 3 Credits - 2 Lecture-3 Lab</u> Hrs/Wk

This course covers ambulance operation, laws, maintenance, and safety; emergency response driving and route planning; communication systems, radio types, HEAR system, codes, and correct techniques.

OA 2221 - Medical Terminology I - 3 Credits - 3 Lecture Hrs/Wk

Introduction to medical terminology including medical prefixes, suffixes and word stems. Study in each system is categorized into additional prefixes and suffixes, diagnostic, symptomatic and operative terminology. Basic coverage of body systems and of skeletal structures.

Other Required Classes

CJ 203 - Crisis Intervention - 3 Credits - 3 Lecture Hrs/Wk

Crisis intervention covering domestic violence, problems with juveniles, substance abuse, legal and social restrictions and implications and methods of prevention and <intervention.

MTH 70 - Elementary Algebra - 4 Credits - 4 Lecture Hrs/Wk

The transition from arithmetic to algebra for students with little or no previous experience in algebra. Includes concepts of numbers, integers, inequalities, solving linear equations and rational expressions, their generalization and simple algebraic procedures and applications.

Prerequisite: Appropriate score on placement test or successful completion of MTH 20 or MTH 30 with a C or better or instructor consent.

WR 121 - English Composition - 3 Credits - 3 Lecture Hrs/Wk

Presents the fundamentals of expository prose through the development and frequent exercise of writing abilities. Designed to help students learn the use of unity, clarity, coherence and detail in the development of written ideas.

Prerequisite: WR 90 with a grade of C or above, placement test score or instructor consent.

Please refer to the Southwestern Oregon Community College Catalog for a description of the Social/Behavioral Science elective courses offered to fulfill this requirement. Please note that ANTH 103 General Anthropology is recommended to fill the Social/Behavioral Science elective, but it is ultimately your choice.

Appendix B

SOUTHWESTERN OREGON COMMUNITY COLLEGE

COURSE INFORMATION UPDATE
for NEW and REVISED CREDIT COURSE OUTLINES
(Please use non-credit outline form for non-credit submissions.)

APPROVAL SIGNATURES:						DATE:	
Division Director							
Manager							
Instructional CouncilOl							7/16/03
DIRECTIONS: Please ne Incomplete					on below to	r each	course.
1. Course Number:	HE	257A /	HE*92	28A			
2. Course Title:	Em	ergend	y Med	ical Te	chnician	- Bas	sic
3. Course Sub-Title:							
Program Type: (CHOOSE ONE ONLY)	LD	Andreas Consumer and the	OccPi		200 200 200 200 200 200 200 200 200 200	ipp	Post Sec Remedial/ Developmental Educ
	AE	E/GED/E	SAST-LAND SASTANIAN SASTANIAN SASTANIAN SASTANIAN SASTANIAN SASTANIAN SASTANIAN SASTANIAN SASTANIAN SASTANIAN Ny faritr'ora ny faritr'ora	<u> </u>	ther Adult		Non-Reimbursable
5. This Outline is:			New				Revised 🗵
6. Offered for:	Cre	dit 🛛 🖂	Contd	Ed Units	(CEU) LI	Pro	f Development Units (PDU)
7. Number of Credits: (See hours/credit for	nula be	elow)	5	1000	oved for CE Approving A	erio - Grand - Cod	
PROBERTO MARKETENNES PROBENCE RANGE.							as repeating a course for a script for the same course.)
Once 🛛 Ty	vice	□	Times		Other (Spe	ecify)	Unlimited
9. Course Hours (Instru	ctor wo	rkload/pa	ay will be	e based o	n the inforn	nation	below):
(CLOCK HOUR	s) -	Hours/V	Veek	Total Co	urse Hours		
LECTURE		4			14	Dep	artment of Education's formula
LAB		3			33		(Full Term Course)
LECTURE/LAB						1 cre per t	dit = 11 to 12 <i>Lecture</i> hours term
TBA LAB HOURS						1	edit = 22 to 24 <i>Lecture/Lab</i> s per term
INDEPENDENT ST	UDY					1 cre term	edit = 33 to 36 <i>Lab</i> hours per
то	TAL	7			77		

	ourse Description: (State approved chanced for Southwestern.)	ourse descr	iption must be	e included, if	availab	le. May be	
. ∤ τ	This course prepares individuals for Fechnician-Basic. The course is des of illness and injuries and proper pro	signed to dev	velop student	skills in reco			
	· ,					÷	
-							
11. Gr	ading: S,U,I 🔲	A,B,C,D,F,I		Either	X	Non-Graded	
	Minimum Grading Criterior	12	Recom	mended We	ight or 9	% of Grade	
	Written Examination			30-4	0%		
	Practical Examinations			30-4	0%		1
	Attendance/Participation			20-4	0%		
12. F	Required Pre-Requisites: (If more the NOTE: This information will be en						
	Course(s) <i>and</i> Min. Grade:				· · · · · · · · · · · · · · · · · · ·		$\overline{\mathbf{T}}$
F	Placement Test Score:					···	-
C	Other:	Enrollment prior to enr	olling.	and Prerequi	stie Veri	m Course ification Form	
ī	s Instructor Consent Required to R	void 184 Mai Leongha villa		Yes		No 🗆	-
39F.	equired Concurrent Courses: NOTE: This information will be ent		olleague and i				
(Course No(s):						
1	ab(s):						
14, D	oes this course require a separate l	ab?			Yes	□ No I	\boxtimes
(Course No:	Gra	ded Separate	ily? Yes:		No 🗆	
15. Is	this course part of a sequence?				Yes	⊠ No	
1	Must the sequence be taken in orde	1?		Yes		No 🗆	T
ī	What are the course sequence num	bers?		HE*25	7A ANE) HE*257B	1
				(HE*9	28A AN	D HE*928B)	
16. Is	this course double numbered?	Yes	71 I	HE*928A (FOR VOLU	NTEER	No S)	

17.	Course Objectives: (Knowlede	ge of specifics	, comprehension, a	application, a	nalysis, s	ynthesis, eval	uation.)	
Kn	owledge:	(The stu	dent will) 🦂 🔗					
a)) Understand the responsibilities of the EMT-Basic when responding to emergency care situations							
b)	b) Comprehend the proper protocols for conduct a patient assessment for illnesses/injuries and identify signs, symptoms, and causes of conditiion							
c)	Understand steps the EMT-Barpartner.	sic must take	to ensure the safe	ty of the indi	vidual EM	/Tand his/her	, !	
Ski	lls:	(The stu	dent will be able to)	San			
a)	Assess emergency situations a	and perform e	mergency care wi	thin the EMT	-Basic sc	ope of practic	ce.	
b)	Demonstrate proper selection	and use of er	nergency equipme	ent				
c)	Lift, move, position and otherw injury	ise handle a į	patient in such a w	ay as to mini	imize disc	comfort and fi	urther	
Att	itudes and Values:	(The stu	dent will have)	and State of the Control of the Cont				
a)	Developed a sensitivity towards field of emergency medicine	s the importar	nce of professiona	l and ethical	behavior	and practices	s in the	
b)	An appreciation of the important medicine	nce of continu	uing education and	training in ti	ne field of	emergency		
c)	An appreciation of the role that providers	t teamwork a	nd cooperation pla	ys among ei	mergency	/ medical sen	<i>r</i> ices	
d)	Recognized the importance of insure a safe work environmen		safety and will rou	tinely apply	skills and	techniques t	0	
18.	Status:	Active	⊠	Inac	tive			
19.	Recommended Enrollment:	Lecture	24	يا "	ab .	24		
20.	Does this course require spec	ial fees?		Yes	Ø	No		
-	If yes, what is the fee?	\$95.00	Fee covers:	Expendable EMT course		equipment for Testing	or	
21.	Contents Outline: (must be in NOTE: Form will automa To add a subsection item subsection number using	tically numbel , use <shift< th=""><th>r outline items whe ><enter> to go t</enter></th><th></th><th></th><th></th><th></th></shift<>	r outline items whe > <enter> to go t</enter>					
	Preparing to be an EMT-B 1.1 Introduction to Emergence 1.2 The Well-Being of the Elf 1.3 Medical, Legal, and Ethical 1.4 The Human Body 1.5 Baseline Vital Signs and 1.6 Lifting and Moving Patien 1.7 Practical Lab: Baseline Vital 1.8 Evaluation: Preparatory Airway	MT-B cal Issues SAMPLE Hist its Vital Signs an	tory	atients				
	2.1 Airway 2.2 Practical Lab: Airway 2.3 Evaluation: Airway Mode	eule						
LH	Patient Assessment							

 $\mathcal{F} = \mathcal{N}$

- 3.1 Scene Size-Up
- 3.2 Intial Assessment
- 3.3 Focused History and Physical Exam Trauma Patients
- 3.4 Focused History and Physical Exam Medical Patients
- 3.5 Detailed Physical Exam
- 3.6 On-Going Assessment
- 3.7 Communications
- 3.8 Documentation
- 3.9 Practical Lab: Patient Assessment
- 3.10 Evaluation: Patient Assessment Module

IV. BLS Instruction and Certification

V. Medical Emergencies

- 5.1 General Pharmacology
- 5.2 Respiratory Emergencies
- 5.3 Cardiovascular Emergencies
- 5.4 Aspirin Administration for EMT-Basic (Oregon DHD EMS & Trauma System Curriculum)
- 5.5 Neurologic Emergencies
- 5.6 Communicable Diseases
- 5.7 The Acute Abdomen
- 5.8 Diabetic Emergencies
- 5.9 Allergic Reactions and Envenomations
- 5.10 Substance Abuse and Poisoning
- 5.11 Environmental Emergencies
- 5.12 Behavioral Emergencies
- 5.13 Obstetrics and Gynecological Emergencies
- 5.14 Practical Lab: Medical/Behavioral/Obstetrics
- 5.15 Evaluation: Medical/Behavioral/Obstetrics

VI. Practical Lab Review

VII. Trauma

- 7.1 Kinematics of Trauma
- 7.2 Bleeding
- 7.3 Shock
- 7.4 Soft Tissue Injuries
- 7.5 Eye Injuries
- 7.6 Face and Throat Injuries
- 7.7 Chest Injuries
- 7.8 Abdomen and Genitalia Injuries
- 7.9 Musculoskeletal Care
- 7.10 Head and Spine Injuries
- 7.11 Practical Lab: Trauma
- 7.12 Evaluation: Trauma

VIII.Special Populations

- 8.1 Pediatric Assessment
- 8.2 Pediatric Airway and Medical Emergencies
- 8.3 Pediatric Trauma
- 8.4 Geriatric Assessment
- 8.4 Practical Lab: Special Populations
- 8.5 Evaluation: Special Populations

IX. Operations

- 9.1 Ambulance Operations
- 9.2 Gaining Access
- 9.3 Special Operations
- 9.4 Evaluation: Operations

X. AED/SAD

- 10.1 AED/SAD (Oregon DHD EMS & Trauma Systems Curriculum)
- 10.2 Practical Lab: AED/SAD
- 10.3 Evaluation: AED/SAD
- XI. Practical Lab Review
- XII. Clinical/Field Study
- XIII.Final Written and Practial Evaluation

22. Recommended Text(s): Complete citation(s). (This information is required.)									
Emergency Care and Transportation of the Sick and Injured. American Academy of Orthopaedic Surgeons (latest edition)									
Emergency Care and Transportation of the Sick and Injured Student Workbook. American Academy of Orthopaedic Surgeons (latest edition)									
EMS Skills Performance Reference Guide Systems (latest edition)	e. Oregon Department of Health Division	- EMS and	i Trauma						
American Heart Association Textbook of A	ACLS. Chapter 20: Automated External I	Defibrillatio	n						
23. Required Materials/Supplies/Tools:	,我们的时间,但是最后通过,可能被到了了。 6800年,1985年,第1800年,第1800年,								
Pocket Mask									
24. References & Resources used to dev	velop this course (Print and Non-Print):								
Emergency Care and Transportation Instru Orthopaedic Surgeons.	uctor Resource Kit. 8 th Edition. 2002. A	merican A	cademy of	7					
Emergency Medical Technician-Basic: Na National Highway Traffic Safety Adminstra			ember, 1994	١.					
25. Library Resources for Course Suppo									
Are the resources in the library adequate t	to support this course: Yes 🔲	No 🗆	N/A [Are the resources in the library adequate to support this course: Yes DNO NO NO					
If not, complete the library resources cour Division Director. (The form can be locat Neighborhood/ITT/Outlines/Forms/Library	ed using the following path: Network	ırse outline	e to the						
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What is the effective date of this course? (If new)	Term:	Year:
Division Director: Please submit completed "Library Resources Sharon Tashjian, Tioga Hall, 2nd floor Library when course the Class Schedule.		
FOR OFFICE OF INSTRUCTION	USE ONLY	i og er koloniske i storiet Ledus og er skrivet i storiet
Reimbursable? Yes \(\subseteq \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ó. L	

4-01-03

Appendix C

EMERGENCY MEDICAL TECHNICIAN - BASIC

INSTRUCTORS:

Jerry Huff, EMT-I

Pager: 269-6022

Home: 888-3004, Calls accepted until 2200 hours only!

Work: 267-2933 (Employee Line)

Dan Crutchfield, EMT-I

Work: 269-1191

Home: 269-3996, Calls accepted until 2200 hours only!

Please note:

Please be polite when calling any of the above numbers, families and coworkers do not

have to take your messages!

COURSE DESCRIPTION:

This course is designed to prepare individuals for certification in the State of Oregon only as an EMT-Basic. The course is designed to develop student skills in recognition of signs and symptoms of illness and injury and proper emergency care procedures. This course will also build personal skills in hands on capabilities and a positive attitude towards the patients they may deal with.

TEXT BOOKS:

Emergency Care and Transportation of the Sick and Injured Textbook, Lynn A. Crosby, MD and David G. Lewallen, MD., Editors. American Academy of Orthopedic Surgeons, Eighth Edition, 2001

REQUIRED

Emergency Care and Transportation of the Sick and Injured Workbook, Lynn A. Crosby, MD and David G. Lewallen, MD, Editors. American Academy of Orthopedic Surgeons, Eighth Edition, 2001

REQUIRED

Emergency Medical Services Skills Performance Reference Guide: Oregon Department of Human Resources, Health Division - Emergency Medical Services, January, 1999. REQUIRED

EMS Field Guide: Lesage, Derr, Tardiff; Informed

REQUIRED

Pocket Mask REQUIRED

COURSE OBJECTIVES:

The Student will be able to (skills):

- Assess emergency situations and perform emergency care within the EMT-B Scope of Practice.
- 2) Demonstrate proper selection and use of emergency equipment.
- 3) Lift, move, position, and otherwise handle patients in a way that minimizes discomfort and further injury, while minimizing the risk of personal injury.

The Student will be able to (knowledge):

- Define the responsibility of the EMT-B when responding to emergency care situations.
- Describe patient assessment for illnesses or injuries and to identify signs and symptoms and cause of conditions.
- 3) Have knowledge to prepare for Oregon certification as an EMT-B.

The Student will have (values):

- 1) Recognized the importance of professional and ethical behavior and practices in the field of emergency medicine.
- 2) The ability to learn and appreciate the importance of continuing education and training in the field of emergency medicine.
- An appreciation for the importance of teamwork and cooperation among emergency service providers.
- 4) Recognize the importance of occupational safety and will routinely apply skills and techniques to insure a safe work environment.

STUDENT OBLIGATIONS:

- Oregon Department of Health requires attendance at all lectures and practical sessions. Anyone missing two (2) sessions without the approval of the instructors will be dropped from the class. Anyone missing an excessive number of classes will be counseled by the instructors. If the problem continues the student will be dropped from the class.
- 2) Habitual tardiness will be cause for counseling.
- Must pass written and practical exams.
- 4) Quizzes maybe given at each class covering the reading material for that class. The guiz will have no more than fifty (50) questions.
- 5) There will be a mid-term and final exam each term. The mid-term will have no more than one hundred (100) questions, and the final will have no more than two hundred (200) questions.
- 6) There will be sectional exams. The sectional exams will have no more than fifty (50) questions.
- The Instructors understand that there are students that are "On Duty" during class times. When paged out you are dismissed to go on those calls. Please Note!!!! All volunteers will not be dismissed to go to medical calls. You will not arrive prior to other rescue EMS personnel. However you will be allowed to go to all fires or requests for manpower, etc. Please check with the Instructor prior to leaving he class. The student will be responsible for the class portions that they have missed. Excessive radio traffic will not be tolerated, please bring an ear phone so the rest of the class will not be distracted.
- 8) Your instructors are often going to be coming from work and it is possible that they may be a few minutes late. If the instructor does not arrive in the classroom by 1900 hours you are dismissed for the evening.

ACADEMIC DISHONESTY: PLAGIARISM AND CHEATING:

The policy of the Board of Education of Southwestern Oregon Community College on Student Rights, Student Code of Conduct and Student Grievance Procedures outlines penalties ranging from admonition through expulsion for violations including plagiarism and academic cheating.

In the policy academic plagiarism is defined as: "The intentional submission for evaluation to a college instructor or administrator of material based, in significant part, on work done by someone other than the submitter without reasonable written indication to the evaluator of the material's true source."

Academic cheating is defined as: "The intentional submission for evaluation to a college instructor or administrator of material based, in part, on a source or sources forbidden by generally accepted standards or by regulation established by the evaluator and disclosed in a reasonable manner." The complete policy, penalties, and recourse through the Grievance Procedure can by found in the Southwestern Student Handbook.

GRADING:

Your final grade will be based on the total number of points you have accumulated during the course. You will be assigned a grade per each term.

You will not be allowed to register for EMT-Basic, Part B (Spring term) unless you have a final grade of "C" or higher at end of first term.

Attendance at the lectures and practical sessions will be taken into account if your point total is close to a breaking point for the next higher grade. The following grade format will be used:

90% to 100% = A 80% to 89% = B 70% to 79% = C Below 70% = F

To qualify to take the State of Oregon EMT-Basic exam you will have to receive a final grade of "C" or higher and you must pass the practical exams.

EMERGENCY MEDICAL TECHNICIAN - BASIC CLASSROOM SCHEDULE

	CLASSROOM SCHEDULE	
01/06/04	Introduction of Instructors Introduction To Emergency Care Well Being of the EMT-Basic	1hr 1.5hr 1.5hr
01/08/04	Medical/Legal-Ethical Issues The Human Body	1.5hr 2.5hr
01/13/04	Baseline Vital Signs/SAMPLE Lifting and Moving Patients	2hr 2hr
01/15/04	Lifting and Moving Patients Exam Review Lab - See Lab Schedule	1hr 1hr 1hr
01/20/04	Airway	4hr
01/22/04	Lab - See Lab Schedule Exam	1hr
01/27/04	Scene Size-Up Initial Assessment Focused History and Physical: medical	0.5hr 1hr 2hr
01/29/04	Lab - See Lab Schedule	
02/03/04	Focused History and Physical: Trauma	4hr
02/05/04	Lab - See Lab Schedule	
02/10/04	Detailed Physical Exam On-going Assessment Communications	1hr 1hr 1hr
02/12/04	Lab - See Lab Schedule	
02/17/04	Documentation Exam General Pharmacology	1.5hr 1hr 1hr
02/19/04	Lab - See Lab Schedule	
02/24/04	Respiratory Emergencies Cardiovascular Emergencies	2hr 1.5hr
02/26/04	Lab - See Lab Schedule	
03/02/04	Cardiovascular Emergencies	3.5hr
03/04/04	Cardiovascular Emergencies Aspirin Administration	2hr 1hr
03/09/04	Diabetic Emergencies Neurologic Emergencies Communicable Diseases Allergies	1hr 1hr 1hr 1hr

03/11/04	Lab - See Lab Schedule	
03/16/04	Poisoning/Overdose Environmental Emergencies	2hr 1hr
03/18/04	Final Exam - First Term	
03/30/04	Behavioral Emergencies Obstetrics Exam	1hr 2hr 1hr
04/01/04	Lab - See Lab Schedule	
04/06/04	Kinematics of Trauma Bleeding and Shock Soft Tissue Injuries	1hr 2hr 2hr
04/08/04	Musculoskeletal Care	4hr
04/13/04	Injuries to the Head and Spine	4hr
04/15/04	Lab - See Lab Schedule Exam	1hr
04/20/04	Infants and Children	3hr
04/22/04	Lab - See Lab Schedule Exam	1hr
04/27/04	Ambulance Operations Gaining Access	1hr 1hr
04/29/04	Lab - See Lab Schedule Exam	1hr
05/04/04	Overview and Review	2hr
05/06/04	Lab - See Lab Schedule	
05/11/04	Exam	1hr
05/13 & 18/04	Lab - See Lab Schedule	
05/20/04	AED/SAD	2.0
05/25/04	Lab - See Lab Schedule	
05/27/04	Lab - See Lab Schedule	
06/01/04	Lab - Final Practical Exam	
06/03/04	Final Written Exam	

EMERGENCY MEDICAL TECHNICIAN - BASIC

LAB SESSION SCHEDULE

01/15/04	Baseline Vitals - SAMPLE Histo Lifting and Moving Patients
01/22/04	Airway Oxygen
01/29/04	Size-up Patient Assessment Focused History - Medical
02/05/04	Patient Assessment Focused History - Trauma
02/12/04	Documentation
02/19/04	Diabetic Emergencies Altered Mental Status Glucose Monitoring
02/26/04	Cardiovascular Emergencies AED Epinephrine
03/11/04	Lab Review
04/01/04	Environmental Emergencies Behavioral Emergencies Obstetrics
04/15/04	Splinting and Spine Board Bleeding and Shock Soft Tissue Assessment
04/22/04	Infants and Children Gaining Access Extrication
04/29/04	Lab Review
05/06,13,18/04	Various Lab Practice
05/20/04	AED/SAD
05/25/04	Baby Boards
05/27/04	Baby Boards
06/01/04	Final Practical Exam

Appendix D

Emergency Medical Technician Program Southwestern Oregon Community College

Clinical Objectives for EMT-B Student Hospital Experience

Adopted from EMT-Basic National Standard Curriculum

The clinical objectives listed below are to be carried out under supervision and in accordance with hospital policy and established clinical agreements. Students should observe, and demonstrate whenever possible, the clinical objectives listed. The student's instructor or assigned preceptor should initial and date each objective when it is attained. In situations where objectives are not achievable in allotted time, programmed patient simulations or other activities may be used to ensure student competency.

Name of EMT-B Student	_Phone Number_			
Course Director	_Phone Number_			
		Observer	1	Date
Clinical Objectives	-,	·····		
1) Tour an Emergency Room			_/	
2) Demonstrate patient assessment and obtain and record at least one s	set			
vital signs in an Emergency Room. Vital signs include blood p	ressure,		_/	
pulse, respirations, temperature.				
3) The following can be completed under supervision when the opportur	nity			
presents itself.				
A) Obtain and record neurological signs (level of consciousnes	is,			
pupil reaction to light, grip).			_/	
B) Observe an intravenous line being started and see how it is				
secured in place.			;	
C) Observe the administration of an injection.			—′;	
D) Administer oxygen to a patient.			_'	
E) Accompany a patient to a specific procedure (example: x-ra	ıy,		,	
physical therapy, etc.)			'	
E-remoney Boom				
Emergency Room A) Observe the unloading procedure of a patient from an ambu	ulance		1	
B) Observe the care given to a patient with chest pain.		·		
C) Observe and participate in the cleansing and bandaging of	wounds.		_/	
D) Observe and participate in the application of a cast.				
E) Observe and participate in techniques used in transferring a	a patient			
from an ambulance cot to an Emergency Room cart.			_/_	
F) Accompany an Emergency Room staff member in transport	ting			
a patient to his room for admission to the hospital.		,	_/_	
G) Observe the care given to a patient in one of the following t	types			
of shock: hypovolemic, respiratory, cardiogenic, psyc	chogenic,			
neurogenic, metabolic, septic.			!	
H) Interact with a patient brought to the Emergency Room, and	d _.			
with friends and relatives of the patient. Observe the	er e		,	
behavior in the situation.	D bu		/	
Observe patient history taking techniques in an Emergency	Koom by			
1) Registered Nurse two times. Follow through by ta	King		1	
a history	**		-;-	
 Third time under supervision. Observe and participate in the proper technique of physical 				
assessment.			1	
d55655111611t.				
Verification of the Course Director				
I certify that the student identified at the top of this form has co	ompleted the real	ired clinical l	hours	for EMT-
B students in hospital settings, has observed/demonstrated the listed o	biectives whenev	er feasible. a	nd h	98
completed patient simulation exercises to satisfy objectives not attainable	ole during designa	ited clinical ti	me.	
Completed parent annualient exercised to easily expenses the annual				
Signature of Course Director	Date	_		

Emergency Medical Technician Program Southwestern Oregon Community College

Objectives for EMT-B Student Ambulance Experience

The objectives listed below are to be carried out under supervision and in accordance with established agreements with ambulance service providers. Students should observe and demonstrate, whenever possible, each objective identified. The students' instructor or assigned preceptor should initial and date each objective attained. In situations where objectives are not attainable within allotted time, simulations or other activities may be used to insure student competency. The goal for student ambulance experience is for students to observe/participate in 5 ambulance runs and to practice skills associated with maintaining and operating ambulances and EMS equipment.

Name of EMT-B Student_		
Ambulance Service	Phone Number	
Course Director	Phone Number	
Ambulance Ride Time (each type run should be indicated),	of ambulance run, activities in which the student	participated, and the date of the
Type of Run	Student-Involved Activities	Observer Date
2)		
3)		
4)		·

3) Demonstrate proper techniques 4) Observe activities and conduct of scene of an EMS incident. 5) Observe proper completion of reference run reports. 6) Conduct an inspection of an amocheckoff form. 7) Conduct an inventory of equipm	d in responding to an emergency call. in use of a radio and in the conduct of a call. of providers of emergency services at the eport forms and correctly complete sample bulance unit and complete an inspection	
Verification of the Course Direct	or	
B students in ambulance settings,	dentified at the top of this form has completed the has observed or demonstrated the listed objectives to satisfy objectives not attainable during defined the listed objectives and attainable during defined the listed objectives are attainable during the listed objectives are attained attainable during the listed objectives are attained attainable during the listed objectives are attained attained attainable during the listed objectives are attained attain	ves whenever feasible, and has
Signature of Course Direct	tor Da	ate

Appendix E

MEMORANDUM OF AGREEMENT EMT Training

Parties to Agreement

This Agreement is made and entered into by and between Southwestern Oregon Community College, herein referred to as "College" and Bay Area Hospital, Coos Bay, Oregon, herein referred to as "Hospital."

Purpose of Agreement

The College is authorized by law to maintain instructional programs to train students in Emergency Medical Technology (EMT). The College and the Hospital recognize the need to provide students in the EMT program an opportunity for clinical experiences at the Hospital and, through this Agreement, establish the terms and conditions under which clinical experiences will be available to students.

Instructional Planning

- 1) Students registered in the College's EMT-Basic certification program will participate in scheduled clinical practice at the Hospital which will be considered an extension of College laboratory experiences.
- The College will assume responsibility for developing and administering the EMT educational program including program scheduling, curriculum content, faculty appointments and related matters.
- 3) The College will plan for clinical experiences through the course director assigned to teach a specific EMT class for which clinical practice is required. The EMT course director will coordinate with the Nurse Administrator or any other personnel designated by the Administrator of the Hospital.
- 4) The days and hours of the clinical experiences are to be planned by the course director of a specific EMT class in cooperation with designated personnel at the Hospital.
- 5) Student clinical experiences are to be selected and supervised by the course director of specific EMT courses at the College. EMT-Basic students should receive opportunities to assist Hospital personnel consistent with the scope of practice of the certification level for which they are being trained. Students will assist in emergency room settings while under the direct supervision of a Registered (R.N.) or physician.
- 6) EMT courses and curriculum at the College will be approved by the Oregon Department of Education and the Health Division of the Oregon Department of Human Resources.
- 7) The Nurse Administrator or other assigned staff at the Hospital and College faculty will cooperate in the concurrent and periodic evaluation of the clinical program established in this Agreement.

Specific Responsibilities of the Hospital

- 1) Patient care will, at all times, be the direct responsibility of the Hospital and its employees. The Hospital reserves the right to limit any students' participation in patient care.
- 2) The Hospital will ensure that students are supervised at all times by a physician or R.N. on staff at the Hospital.

 Arrangements for supervision will be made by the Director of Nursing or other nursing personnel designated by the Hospital.
- 3) The Hospital will provide students with personal protective clothing, gloves, masks, and related equipment that are needed to protect against exposure to blood borne pathogens.
- 4) The Hospital will make areas available for student experience, including the necessary equipment and supplies for giving students practice in specific emergency medical skills.

, acific Responsibilities of the College

- 1). The College, through its EMT program assistant, will plan the schedule of student clinical assignments and notify the Hospital of the schedules and assignments. The College will obtain the Hospital's approval of schedules and assignments two weeks prior to implementation.
- 2) The College will require that all students comply with applicable rules, regulations, policies, and procedures of the Hospital while at the facility, including requirements for confidentiality of patient information.
- 3) The College will ensure that students have completed any health screening required by the Hospital and that the health status and physical condition of each student conforms to the Hospital's standards. It is the student's responsibility to make an appointment with the Employee Health Department and provide a record of current immunization including Hepatitis B, MMR, Chicken Pox through immunization records or by Oral History, and Tetanus. The student will also provide documentation of a current PPD.
- 4) The College will ensure that students have completed an urine drug screen as required by the Hospital and results will conform to the Hospital's standards.
- 5) The College will ensure that all students assigned to the Hospital for clinical training will have in effect professional liability and malpractice insurance coverage in an amount of not less than \$1,000,000 per occurrence while the student is engaged in clinical activities at the Hospital. The College will provide evidence of such insurance to the Hospital upon request.
- 6) The College will provide Worker's Compensation Insurance coverage for all students assigned to the Hospital under this Agreement.
- 7) The College will withdraw any student from the clinical area if found unacceptable to the hospital for reasonable cause.
- 8) The College assumes full responsibility for student records.

Terms and Renewal of Agreement

1) This Agreement shall be effective beginning January 1, 2003 and may be terminated by mutual consent of both parties or by either party upon ninety (90) days notice in writing delivered by mail or in person. Termination of the Agreement, however, shall not be effective until a class currently in progress has completed the program of study. Termination of this Agreement shall be without prejudice to any obligations or liabilities of either party already accrued prior to such termination.

Signatures

Each of the parties agrees to hold the other harmless from, and indemnify the other against, any and all cost, damage or expense arising out of any claim, action or suit related to the performance of the obligations and services by each of the parties to this Agreement.

This Agreement and any changes, alterations, modifications, or amendments to it shall not be effective until approved by the appropriate representative of the parties to this Agreement. The parties to this agreement cause the Agreement to be executed on the dates set forth below.

For:)Southwestern Oregogy Community College	For: Bay Area Hospital
fly les 4	Kenel & Small
Reundes -	Signature DANIEL L. Smith
Coordinator Publicately Faming	Print Name President CEO
Title /2/3	Title 1/20/03
Date / /	Date /

Revised: 10/10/02

Appendix F

MEMORANDUM OF AGREEMENT

Southwestern Oregon Community College and Bay Cities Ambulance

This mutual agreement is entered into by and between Southwestern Oregon Community College, referred to herein as "TRAINING PROGRAM" and Bay Cities Ambulance referred to herein as "AMBULANCE ASSOCIATION".

Oregon Health Division, Emergency Medical Services Section, in accordance with Oregon Administrative Rules, require training programs for EMS to have provisions for ambulance observation by EMT-BASIC students, referred to as "TRAINEE(S)", which include affiliation with an approved ambulance service that offers such clinical experience;

Because Emergency Medical Services Section of the Oregon Health division requires written memorandum of TRAINING PROGRAM affiliation with an AMBULANCE ASSOCIATION that provides such clinical observation;

IT IS MUTUALLY AGREED as follows:

The terms of this agreement shall be entered into on the 1st day of February, 2004 and terminate on the 30th day of June, 2005, unless earlier terminated by the giving of sixty (60) days written notice from one party to the other.

AMBULANCE ASSOCIATION agrees to:

- A. In cooperation with TRAINING PROGRAM, schedule ASSOCIATION ambulance clinical observation for each trainee.
- B. Assure that TRAINEES receive supervision by a qualified ASSOCIATION employee during clinical observation.
- C. Allow clinical observation by a maximum of two (2) TRAINEES at a time.
- D. Establish policies and procedures for trainee clinical observation which include, but need not be limited to, roles and responsibilities of TRAINING PROGRAM and ASSOCIATION, description of skills which supervised trainees may perform during clinical observation, dress code, rules of conduct, etc.
- E. Admit all TRAINEES regardless of race, gender, creed, religion, etc.
- F. Require TRAINEES to follow above policies and procedures.
- G. Notify TRAINING PROGRAM Coordinator of any incident involving a TRAINEE(S).

TRAINING PROGRAM agrees to:

- A. Provide didactic and laboratory instruction to prepare TRAINEES for clinical experience.
- B. Coordinate with ASSOCIATION for scheduling of TRAINEES for clinical observation.
- C. Requires TRAINEES to follow policies and procedures of ASSOCIATION while on clinical observations.
- D. Upon request, provide ASSOCIATION with evidence of liability insurance.

Executed by the parties this 18th Day of Sanuary	_in the Year_20042.
Bulant	Jan ley &
Signature of Ambulance Representative	Signature of Southwestern Representative
TSnuce Latta	Paul Reynolds
Printed Name	Printed Name
PresiDont	Coordinator POTED
Title	Title

Appendix G

1.

EMT Instructors

Brown, Miriam 95672 Sitkum Lane Myrtle Point OR 97459

Conley, Brian 787 North Central Coquille OR 97423

Crutchfield, Dan 92450 20th Lane Coos Bay OR 97420

Eck, Michael 2530 Delores Lane North Bend OR 97459

Houston, Cheryl 532 Bender Street Myrtle Point OR 97458

Huff, Jerry 90825 Evergreen Lane Coos Bay OR 97420

Mendez, Terry 588 Madison Street Coos Bay OR 97420 Palmer, Ed PO Box 266 Gardiner OR 97441

Schultz, Robin PO Box 3077 Coos Bay OR 97420

Fred Siewert Lower Umpqua EMS 600 Ranch Road Reedsport OR 97467

Brian Wildman 983 Seagate Coos Bay OR 97420

Ken Wood PO Box 541 Brookings OR 97415

PROFESSIONAL SUMMARY

Miriam M. Brown

19 19 19 19	994 BPST Instructo	e SWOCC SWOCC rmedic Self study
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Certification

EMT 1-2-2d-3 and Paramedic

CPR Instructor ACLS Provider PHTLS Instructor TEAM Provider PALS Provider Course Instructor

Professional Experience

EMT through all levels with Myrtle Point Ambulance
First as a volunteer, then part time paid and then full time.
Ambulance director responsible for all functions of the department to include fiscal year budget preparation, supervision of all city medical personnel, providing training, office duties such as ambulance billings, accounts receivable, eg.

(Previous history of banking and accounting positions)

Other Information

9-1-1 Secretary

Ambulance Service Area Advisory Committee Chairperson Myrtle Point Fire District Board of Directors-secretary/treasurer

Other accomplishments

Promoted and sponsored establishment of Myrtle Point Health

District and Myrtle Point Rural Fire Districts.

Brian Conley, BA, EMT-P

787 North Central Coquille, OR 97423 Phone: (541) 396-5124 Email: cone73@msn.com

OBJECTIVE: Job Qualifications for the position of Paramedic/ Firefighter.

QUALIFICATIONS

I have been an EMT and Firefighter for the City of Coquille since 1996. I was certified as a National and Oregon Certified Paramedic in July of 1998. I have a NFPA Firefighter I certificate. I am engineer qualified at my present job in Coquille. In 1998, I took the Pumper Operator Course throught SWOCC. I am EVOC certified. I am currently an instructor for CPR through the American Heart Assoc. I have an Instructor I rating through the old fire instructor classification through DPPST. I have been an assistant EMT instructor for SWOCC since 1997. In 1999, I approached the Coos County Sheriff's Department about being a medic for the county S.W.A.T. team. They gladly accepted and I went to the reserve officer academy to train as a reserve sheriff's deputy. I started attending tactical team training and have been an active part of their team since June 2000. In October 2000, I attended a special training for tactical team medics sponsored by Oregon State Police and DPPST at Camp Rilea, Warrenton, Oregon:

EDUCATION

1991-1995 Bachelor of Arts, Dordt College-Sioux Center, Iowa

1996-1996 EMT-Basic, SWOCC-Coos Bay, Oregon

1997-1998 EMT-Paramedic Certificate, Umpqua Community College-Roseburg, Oregon

EMPLOYMENT

1995-Present Paramedic/ Firefighter for the City of Coquille

My duties at Coquille Fire Department included regular training with the volunteers at least once a week. I currently engineer for my department and trained in all aspects of firefighting. Medically, I am responsibility for primary patient care during my shift I work.

I am responsible for the majority of the billing of Coquille Valley Ambulance.

1997-Present Paramedic-Part-time, Volunteer, City of Myrtle Point

I worked one year part time for the City of Myrtle Point as a Paramedic After one year I was hired by the City of Coquille full time and had

to reduce to a volunteer.

1999 - Present Medical Training Officer, City of Powers FD

In 1999 began training the EMT-Basic's for Powers Ambulance. I am responsible for keeping their training and licenses current. I would train them once a month covering various topics related to

their scope of practice.

PROFESSIONAL SUMMARY

Dan Crutchfield

Education: 1999

EMT Intermediate

Southwestern Community College

1994 1993 **EMT Basic** General

Southwestern Community College North Bend High School / Southwestern

1993-current

Fire Science Technology

Southwestern Community College

Certifications:

NFPA Instructor I NFPA Firefighter II **Pumper Operator** Aerial Operator Interface Firefighter Fire Ground Leader I

Advanced Technical Rescue

Hazardous Materials On Scene Incident Commander

Hazardous Materials Technician Clandestine Laboratory Specialty

Hazardous Materials Technician Trainer (IAFF)

Professional

Experience:

1996 - Present

City of Coos Bay

Firefighter / Engineer

EMT Intermediate Coos Bay Fire & Rescue

1999 - Present

Bay Cities Ambulance

EMT Intermediate

1998 - Present

Southwestern Oregon

Part - Time Instructor

Fire & EMS Community College

1995 - Present

Self Employed

Building Contractor

Accomplishments:

Service to the community: 1993 - 1996

Coos Bay Fire & Rescue Volunteer Firefighter

Professional Development: 1996 - Present

Member-International Association of Firefighters

Michael Eck

Experience

1996-2002

Bay Cities Ambulance

Coos Bay, OR.

Paramedic / Training Officer

- Provide ALS prehospital emergency care to the sick and injured.
- Complete necessary patient care reports and restock and maintain ambulance equipment.
- Organize and present training for company employees as well as members of outside agencies. Maintain appropriate training records.
- Directly supervise shift crew members and organize and delegate the completion of non-emergent tasks.

1997–2002 Southwestern Oregon Community CollegeCoos Bay, (

Part-Time Faculty

- Teach wide variety of EMS and CRP classes for students seeking their associates of applied science
- Clean and maintain equipment used for practical instruction.

1992-1996

Marion County Fire District 1

Salem, OR.

Volunteer Firefighter/ EMT

- Respond as a member of fire suppression crew.
- Provide prehospital emergency care to the sick and injured.
- Participate in practical and didactic training sessions

Education

1993

Chemaketa Community College

Salem, OR.

Associates of Applied Science – Emergency Medical Technology

Certificates and Training

Oregon EMT- Paramedic, ACLS, PHTLS, AHA-CPR, DPSST Dispatcher, DPSST Instructor I and II, PHTLS Instructor, AHA-BLS Instructor, Firefighter Entry Level, HAZMAT Awareness.

PROFESSIONAL SUMMARY

Cheryl J. Houston

Pertinent Education	1982	EMT 1 Course	SWOCC-MP	
	1984	EMT 2 Course	SWOCC	
	1985	EMT 2d Course	SWOCC-Coq	
	1987-88	EMT 3 Course	SWOCC	
	1993	Ambulance-Emergency		
		Vehicle Operators Co	urse	
	1994	UPGRADE Parmedic	Self study	
	1996	BPST Instructor Dev	elopment	Beaverton
	1998-2000	Instructor refresher/2	yr intervals	
	2000	Safety Seat Training	Roseburg	

Certification

EMT 1-2-2d-3 and Paramedic

CPR Instructor ACLS Provider PHTLS Instructor TEAM Provider PALS Provider Course Instructor

Ambulance-Emergency Vehicle Instructor

Professional Experience

EMT through all levels with Myrtle Point Ambulance First as a volunteer, then part time paid and then full time.

Other Information

Teach CPR and First Aid to the Public. Teach public how to put Child Safety Seats into their Vehicles

Other accomplishments

Promoted and sponsored establishment of Myrtle Point Health

District

PROFESSIONAL SUMMARY

JERRY L. HUFF

EDUCATION

1985-1987 EMS CERTIFICATE

SWOCC

CERTIFICATION: OREGON EMT-INTERMEDIATE #115866

AMERICAN HEART CPR INSTRUCTOR

PHTLS INSTRUCTOR NFPA INSTRUCTOR 1

BPST EMERGENCY MEDICAL DISPATCH

PALS INSTRUCTOR **ACLS CERTIFICATE**

PROFESSIONAL

EXPERIENCE

1987-Present

Bay Cities Ambulance

Full time

medic

1987-Present

SWOCC

Part-time

Faculty

1986-Present

Charleston RFPD

Captain EMS

Coordinator

ACCOMPLISHMENTS

Service to the community:

Volunteer Firefighter, Engineer, EMT, Instructor

Boy Scouts, Scoutmaster, Merit Badge Counselor, EMT for Camp Baker and local Camporees 1986-

Present

Professional Development: SWOFA Instructor, Numerous Fire Classes and EMS

Conferences and State of Oregon Roll out Classes

SWOCC:

Instructed: 10 First Responder Courses

9 EMT Basic Courses

3 EMT 2 Courses

3 EMT 2D Courses

1 EMT-Intermediate Lab Instructor

PROFESSIONAL SUMMARY

Terry Mendez

EDUCATION 1997 AA General Liberal Arts Southwestern Oregon CC

1997 AAS Fire Science Technology Southwestern Oregon CC

1999 AAS Paramedic Technology Lane CC

CERTIFICATIONS

BPSST Firefighter III

BPSST Fireground Leader I

BPSST Driver

BPSST Apparatus Operator I

BPSST Instuctor I

BPSST Hazmat Awareness and Operations

Basic Wlidland Fire Management

Oregon & National Registry EMT- Paramedic AHA Health Care Provider with AED Instructor

NAEMT Prehospital trauma Life Support Instructor (PHTLS)

Advanced Cardiac Life Support Certified

PHTLS Certified

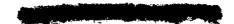
Oregon Pediatric Prehospital Care Certified

PROFESSIONAL EXPERIENCE

2000- Present	Bay Cities Ambulance	EMT- Paramedic
2000- Present	Southwestern Oregon CC	Assistant Track & Field Coach EMS Instructor
1998- 1999	Lane County Fire District #1	Resident Volunteer
1994- 1997	Coos Bay Fire & Rescue	Resident Volunteer

Edward G Palmer

Objective



Employment

1998 - Present

Cal-Ore Life Flight

Brookings, Or

Supervisor

- Paramedic

Flight Medic

Training Officer

FTO

Infection Control Officer

1997 - Present

SWOCC

Brookings, Or

EMS Educator

EMT B & EMT I Course Director/Instructor

• First Responder Instructor

CPR instructor

1995 - 1998

South Coast EMS

Brookings, Or

Paramedic

Paramedic

Training Officer

FTO

Infection Control Officer

Safety Officer

1993 - 1995

Del Norte Ambulance

Crescent City, Ca

Paramedic

Paramedic

Flight Medic

• FTO

Infection Control Officer

Safety Officer

4/93 - 10/93

Grant County Ambulance

John Day, Or

Assistant Ambulance Coordinator

Paramedic

EMS Educator

Robin Scholtz

Education

Certified Nursing Assistant 2001 1096 AAS Emergency Medical 10963 Dental Assistant

umpqua col. Appol College

Swocc

Certs. OR. Paramedic

DRSST Instructor

PHTLS Instructor

DRSST Emergency Medical Dispatch

Emergency Vehicle Drivers Training Instructor
ACLS provider VIIS

AHA.

Firefighter I NFPA

Professional

Experience

1999-Present

Bay Cities Ambulance

Paramedic

Assistant Quality Assu

Dispatching Instructor

Drain Fire District 1995 - Present

Paramedic

1998-1999

Rural Metro

paramedià

1997-1997

Medix

Paramedic

Fredric R. Siewert

Summary

I have extensive experience in the EMS field, both in education and field

experience.

Qualifications

10-92 EMT-P Oregon

10-97 Fire Inst. I + II

Air Medical Crew Course 10-20-96

"98-'00 EMT Intermediate Course Instructor SWOCC

12-01 CPR Inst

ATV Safety Institute Riding Instructor

"86-"96

NFPA Fire Fighter I

7-01

84- Present Volunteer Firefighter

Field Paramedic

92-Present

Work experience

1992-Present

Lower Umpqua Hospital

Reedsport, OR

Paramedic

Shift Supervisor, Field Paramedic, ER Tech, and Training Coordinator.

1984-Present

Mapleton Fire Dept.

Mapleton, OR

Firefighter-Paramedic

Volunteer firefighter-paramedic for a first responding rural fire dept.

1980-1997

Mapleton BP Service Station Mapleton, OR

Owner

Owner, Operator, and Mechanic for a small, successful, community service

station.

1986-1996

ATV Safety Institute

Irvine, CA

ATV Riding Instructor

Teach prescribed All-Terrain Vehicle safety course for ASI and Oregon State

Certification of ATV riders.

Education

1991-1992

Lane Community Collage

Eugene, OR

Paramedic

Oregon Certification

1970-1972

University of Oregon

Eugene, OR

Student

Liberal Arts Classes

Community

Mapleton Lions Club

activities Mapleton Evangelical Church

Mapleton Sports Sponsor

Kool Coastal Cruisers Classic Car Club

Volunteer experience

Mapleton Fire Dept.

Hobbies

Restoring and building fast, old cars.

Family

Married with 2 grown sons. One is a Paramedic and the other is a

student at Western Oregon State University.

PROFESSIONAL SUMMARY

KEN WOOD

EDUCATION:

1982 1995 Brookings Harbor High School

Umpqua Community College (Paramedic)

CERTIFICATION:

Haz-Mat Awareness

(PALS) Pediatric Advanced Life Support (ACLS) Advanced Cardiac Life Support

Instructor

(PHTLS) Pre Hospital Trauma Life Support

Instructor (BLS) Basic Life Support

(DPSST) Instructor I (DPSST) Instructor II High Angle Rescue

(NREMTP)Nationally Registered Paramedic

PROFESSIONAL EXPERIENCE

1996-98

Southern Curry

Paramedic

Ambulance

1997-Present Southwestern Oregon

Community College Director

Instructor

EMS

1997-Present Oregon Health Div.

Certifying Officer

1998-Present Cal-Ore Life Flight

Paramedic

2001-Present Curry County Sheriff

Marine Deputy

ACCOMPLISHMENTS

Service to the Community

Volunteer (EMT)

Bicycle Safety Fair

Safe and Sober Program for Brookings High School

Service to Curry County

Ambulance Service Area Advisory Committee

Appendix H

1.

SOUTHWESTERN OREGON COMMUNITY COLLEGE POSITION DESCRIPTION

COORDINATOR OF PUBLIC SAFETY PROGRAMS

Revised Date: July, 1997

Status: Full-time Exempt Administrator

Reports To: Division Director of Health and Human Services

Evaluation: Annually

PRIMARY PURPOSE: To coordinate Criminal Justice/Law Enforcement, Corrections, Fire Science, Fire Training, Emergency Medical Technician (EMT), and other public safety programs (e.g., Hazmat, Reserve Officer Training Academy (ROTA), Wildland Fire) and to work with appropriate community agencies to assess the needs of local agencies, industries, and businesses for training/educational programs in these areas and coordinate the delivery of such training/educational programs.

DESCRIPTION OF DUTIES AND TASKS:

ESSENTIAL JOB FUNCTIONS

- 1. Coordinate degree and certificate programs in Public Safety, coordinate the development of curriculum and participate in marketing these programs to potential students.
- 2. Identify, develop, market, and coordinate agency, business, and industry needs for training and/or classes in fire, health, safety. Coordinate community needs with college degree programs and recommend training proposals and budgets for approval by college administration.
- 3. In coordination with the Division Director of Health and Human Services, the Associate Dean of Professional/Technical Education, and the Office of Instruction, identify qualified and properly certified instructors to conduct fire, health, and safety courses.
- 4. Participate with the Division Director in the classroom and lab evaluations of instructors and curriculum.
- 5. Develop a district advisory committee that represents criminal justice, corrections, fire, safety, emergency response and other public safety services and conduct regular meetings for the purpose of needs identification.
- 6. Deliver and/or coordinate instruction in specific aspects of fire science such as, but not limited to, Incidental Command System (ICS), wildland fire, structural fire, urban and rural interface fire, industrial fire, marine fire, aviation fire, and search and rescue.
- 7. Coordinate instruction in fire science, criminal justice, EMT, and corrections.
- 8. Coordinate activities with on-campus faculty and Division Directors as they relate to Fire Science and EMP program, and act as a referral agent to college Fire Science, EMT, law enforcement and corrections programs.

- 9. Act as a liaison among local service agencies and appropriate industries on training matters, and be able to coordinate with the state and local fire, police, and EMS agencies.
- 10. Develop yearly budget and budget forecasts for college administrators and monitor and maintain a working budget.
- 11. Travel to sites in Coos, Western Douglas and Curry counties and occasionally outside the college district.
- 12. Attend state and regional meetings and training sessions as needed.
- 13. Identify and recommend the acquisition of instructional materials, fire and rescue equipment, and other resources as needed for the purposes of instruction.
- 14. Maintain a minimum of 65 full-time equivalent (FTE) students annually in fire, safety, and emergency response training.
- Supervise department secretary.

MARGINAL JOB FUNCTIONS

- 1. Attend other meetings and training sessions as directed.
- 2. Perform other related duties as assigned or directed. Follow safety procedures and maintain work area in a clean and orderly manner.

REQUIRED KNOWLEDGE, SKILLS AND ABILITIES

Individuals must possess the following knowledge, skills and abilities or be able to explain and demonstrate that they can perform the essential functions of the job, with or without reasonable accommodation, using some other combination of skills and abilities.

- 1. Broad field experience and a working knowledge base in fire services, EMT, criminal justice, or corrections -- a combination of at least two preferred.
- 2. Experience and/or demonstrated ability to develop training programs in fire, criminal justice, EMT, health, or safety for targeted audiences in cooperation with service providers, business, and/or industry.
- 3. Ability to develop curriculum for new programs and courses to the standards required for course and program approvals.
- 4. Ability to work with and cooperate with college faculty and staff at all levels.
- 5. Demonstrated budget planning and budget supervision skills.
- 6. Ability to teach adults, facilitate group discussions, and communicate effectively, both orally and in writing with people of diverse educational, cultural, and generational backgrounds.

- 7. Familiarity with the federal Occupational Safety and Health Administration (OSHA), Oregon OSHA, the Oregon State Fire Marshal regulations, and Federal Emergency Management Act (FEMA) regulations preferred.
- 8. A level of computer literacy sufficient to use software such as word processing, spreadsheets and data bases to produce correspondence, documents, and reports as required by the position.
- 9. Ability to consistently operate within the framework of collegiality and teamwork, using methods such as Total Quality Management for problem solving in the workplace.

OTHER ERGONOMIC REQUIREMENTS

Position may require the employee to bend, lift, stoop, crouch and perform similar movements while performing essential and marginal job functions. All individuals are required to be able to perform these movements without a significant risk of injury, with or without accommodation, or to otherwise demonstrate or explain how they can perform the functions listed above.

QUALIFICATION STANDARDS:

- 1. Education: Bachelor's degree in one of the public safety areas.
- 2. Experience: At least two years full-time or equivalent field experience in a public safety program. At least two years full-time or equivalent teaching experience. Budget development and management experience.
- Valid Oregon driver's license.
- 4. Other Preferences: Master's degree in one of the public safety fields; experience in developing, coordinating, and marketing instructional programs.

SIGN	ATURES
Doubora terapeel	7/28/97
Supervisor	Date 57
Manager	Date 7/29/97
FEO Review	Date

cps/7/97

SOUTHWESTERN OREGON COMMUNITY COLLEGE POSITION DESCRIPTION

SECRETARY TO COORDINATOR OF PUBLIC SAFETY

Revised Date: May, 1999

Full-time Classified, 40 hours per week Status:

Reports To: Coordinator of Public Safety

Evaluation: Annually

Level:

PRIMARY PURPOSE: To assist in the coordination of the Public Safety Training and Education Department programs; Emergency Medical Services (EMS), Fire Science, Law Enforcement Career Development, and other public safety training and career development programs.

DESCRIPTION OF DUTIES AND TASKS:

ESSENTIAL JOB FUNCTIONS

- Assist the Coordinator by administering activities between the Oregon Health Department (OHD) 1. EMS systems, area health education centers (hospitals and ambulance services) and the college EMS (First Responder, EMT-Basic, and EMT-Intermediate) programs. Brief students on program requirements.
- Assist the coordinator with accreditation processes for all programs. Special emphasis on 2. maintaining stringent OHD accreditation documentation procedures. Stay current on changes to requirements. Executing all necessary paperwork prior to the start of class.
- When the coordinator is unavailable, assists in identifying, marketing, and coordinating agency, 3. business, and industry needs for training. May act as liaison between customers and other college agencies (Customized Training, Professional Development, Curry County, etc.).
- Assist in the coordinating and scheduling of instruction in fire science, EMS and law enforcement 4. career development. Arrange for course materials, classroom setup, etc. Assists in providing controls of all testable materials. Coordinate with OHD, college personnel, and local agencies to meet stringent EMT certification testing criteria.
- When coordinator is unavailable, travel to sites in the college district and occasionally outside the 5. district. May attend state and regional meetings and training sessions for EMS program. Attend other meetings as directed by coordinator.
- Assist in monitoring a yearly-working budget. 6.
- Provide general supervision of program students workers. 7.

MARGINAL JOB FUNCTIONS

- 1. Assist the coordinator in orienting agency personnel (training officers, chief officers) on how to keep mandated state training records.
- 2. Maintain a schedule of training sessions and activities, access audiovisual and other equipment materials and instructional resources, including videos as needed for conducting classes for different agencies, make necessary reservations for instructors, obtain necessary governmental permits.
- 3. Perform other related duties (clerical) as assigned. Follow safety procedures and maintain work area in a clean and orderly manner.

REQUIRED KNOWLEDGE, SKILLS AND ABILITIES

Individuals must possess the following knowledge, skills and abilities or be able to explain and demonstrate that the individual can perform the essential functions of the job, with or without reasonable accommodation, using some other combination of skills and abilities.

- 1. Working knowledge of Oregon State Administrative Rules that pertain to the EMS regulations.
- 2. Ability to work on multiple projects.
- 3. Demonstrated ability to assist in budget planning and budget monitoring skills.
- 4. Excellent oral and written communications skills and the ability to communicate orally and verbally in ways that meet clients' needs and levels of understanding. In addition, regularly communicate with federal, state and local government agencies. Knowledge of English, spelling, grammar and industry terminology.
- 5. Ability to respond on short notice to client needs.
- 6. Demonstrated ability to facilitate group discussions, and communicate effectively, both orally and in writing with people of diverse education, cultural and generational backgrounds.
- 7. A level of computer literacy sufficient to use software such as word processing, spreadsheets, and data bases to produce correspondence, documents, and reports as required by the position.
- 8. Demonstrated ability to consistently operate within the framework of collegiality and teamwork, using methods such as Total Quality Management for problem solving in the workplace.

OTHER ERGONOMIC REQUIREMENTS

Position may require the employee to bend, lift, stoop, crouch and perform similar movements while performing essential and marginal job functions. All individuals are required to be able to perform these movements without a significant risk of injury, with or without accommodation, or to otherwise demonstrate or explain how they can perform the essential functions listed above.

QUALIFICATION STANDARDS

- 1. Education: High School diploma or equivalent; Associate degree preferred.
- Experience: One year up to two years secretarial experience required. Two years of related experience preferred and/or fire, health, safety, public safety background as a student or as a volunteer with a fire agency.

Ale Robert Signatu	RES 9/25/01
Supervisor	Date
Judy School	9/25/01
Manager Linklight	Date 9/27/0/
President	Date
SCOLL	9/28/01
EEO Review	Date /

ckh5/99

Appendix I



SOUTHWESTERN OREGON COMMUNITY COLLEGE 2003-2004

COST CENTER -- 1408 EMERGENCY MEDICAL TECH

	2000-2001 ACTUAL	2001-2002 ACTUAL	2002-2003 ADJ. BUDGET	TITLE	2003-2004 RECOMMENDED	2003-2004 APPROVED	2003-2004 ADOPTED
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SOUTHWESTERN OREGON COMMUNITY COLLEGE 2003-2004

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MEDICAL
EMERGENCY
1408
CENTER
COST

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2003-2004 RECOMMENDED	008	7,520	6, 000	31, 125	24, 625
71717 	53415 MOTOR POOL 53631 PERSONAL SERVICES 53742 NURSES LIABL INS 53743 EMT LIABL INS		54020 SERVICES FOR RESALE		
ADJ. BUDGET	800	7, 520		24, 119	17, 619
2001-2002 ACTUAL	76 540 216 216	9,197	445	22, 730	14, 424
2000-2001 ACTUAL	0 60 0 848	7,777	0	18, 428	13,048

Appendix J

84

HAZARDOUS WASTE DISPOSAL PLAN

Southwestern Oregon Community College Plant Services Department March 2001

> Sheldon Meyer Dean of Administrative Services

Dave McKiney Plant Services Supervisor

Amy Pean Plant Services Secretary

Table of Contents

Policy	Page 4
Policy	Page 5
General Guidelines	
Waste Categories Chemical Waste Biohazardous Waste Sharp Materials Radioactive Materials	Page 6
Instructions for Hazardous Waste Disposal Packaging the Waste Labeling the Waste	Page 7
Completing the Chemical Collection Request	Page 8
Problem Request Forms	Page 9
Contaminated Requests	
Hazardous Waste Disposal Guide Office and Shop Waste Aerosol Cans Office Products Cleaning Products Rags Paint Waste Reduction Waste Costs Purchasing Change Procedures Unknowns Recycling Segregate Storage	Page 11
Storage	
Disposal	
Non-Hazardous Wastes, Treatment, Recycling	Page 14
Chemical Recycling	Page 14
Chemical Treatment	Page 15
Chemical Waste Disposal	
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Table of Contents

Pickup	Page 16
Specific Wastes Aerosol Cans Photographic Darkroom Chemicals Used Oil Organic Solvents Infectious Waste	Page 16
Definitions	Page 18
Disposal	Page 19
Storage	Page 20
Glass Recycling	Page 21
Emergencies	Page 22
Reporting	Page 23
First Aid	Page 24

Hazardous Waste Disposal Policy

Southwestern Oregon Community College recognizes the importance of protecting the environment as well as protecting the health and safety of faculty, staff, and students. It is the policy of Southwestern to reduce the use of toxic materials in College operations whenever reasonably possible and to reduce the amount of hazardous waste generated.

College Departments should work towards reducing both the use of toxic materials and the generation of hazardous chemicals in an environmentally sound manner. Disposal of hazardous materials should be considered only after sincere attempts have been made to recycle, recover, or otherwise reuse the material.

It is the responsibility of each employee to handle and dispose of hazardous material in a manner that is in accordance with the guidelines established by the College. These guidelines have been developed so that hazardous waste disposal at Southwestern will be in compliance with all state and federal regulations governing the handling and disposal of hazardous waste.

GENERAL GUIDELINES

The first step in dealing with any chemical spill is to assess the magnitude of spilled material and the associated level of hazard. No one should attempt to deal with a spill until properly equipped with adequate personal protective equipment and spill treatment materials. Risk assessment is successful only if personnel are familiar with the hazardous properties of the material they are handling and have developed methods to follow in the event of a spill.

Information of this type is available from material safety data sheets and from the College's Plant Services Department. The Plant Services Department has the responsibility to respond to chemical spills, respectively, and to oversee cleanup activities. This Department also has the authority to ensure that appropriate cleanup steps are taken in accordance with applicable environmental regulations.

WASTE CATEGORIES

Hazardous waste can be broadly grouped into four categories: chemical, radioactive, biohazardous, and material that is sharp. Each category has hazards that have an effect on safe handling and disposal practices, and a specific waste may have properties of more than one category.

Chemical Waste

Chemical wastes, which are hazardous, are disposed through a hazardous waste disposal program managed by the Plant Services Department. The designation of hazardous refers to chemicals or materials that are corrosive, flammable, reactive (including explosive), or toxic. The regulatory definition of hazardous waste, in a broad interpretation, includes the majority of known chemicals when they are to be discarded.

The hazardous waste disposal program is managed in accordance with regulations of the Oregon Department of Environmental Quality (DEQ) and the U.S. Environmental Protection Agency. These regulations dictate specific methods for disposal of different types of hazardous chemical waste. Therefore, the College has specific guidelines that must be followed regarding packaging, labeling, and disposal of hazardous waste. Since generators are charged for costs associated with waste disposal, guidelines have also been developed by the College for recycling and waste minimization techniques.

Biohazardous Waste

Biohazard or biological hazard means those infectious agents presenting a risk of death, injury or illness to individuals who handle them. Any waste materials that contain such agents must be autoclaved or chemically sterilized prior to disposal into the normal trash. A control, such as sterilizer indicator tape, must be employed to assure the effectiveness of treatment. Other hazards, such as toxicity or radioactivity, should not be ignored when disposing of sterilized materials. If sterilization is not practical, then biohazardous material must be incinerated in a DEQ permitted infectious waste incinerator. Contact the Plant Services Department for information.

Sharp Materials

Material that is sharp, including needles, broken glass, and razor blades, provides a danger both to initial users and to other persons who may subsequently handle it. In addition to causing physical damage, such material, when contaminated, can provide an entry route into the body for toxic or infectious substances.

Sharp material should be enclosed in a rigid container, which the material cannot penetrate. The Plant Services Department should be contacted for disposal. Materials meeting the regulatory definition of sharps include, but are not limited to needles, syringes with or without needles, lancets. Broken glass may be placed in garbage dumpsters after enclosure in rigid containers.

Radioactive Materials

Radioactive materials are not handled at Southwestern at this time in a manner to create a disposable waste condition.

INSTRUCTIONS for HAZARDOUS WASTE DISPOSAL

Federal and state laws require proper disposal of chemical wastes. To make this process as easy as possible, The Plant Services Department has established the Hazardous Waste Disposal program. For waste generators, this system requires three steps: packaging the waste correctly, filling out the Chemical Collection Request and sending the request to us. There is no charge for the pickup service and your Department billing for Hazardous Waste disposal will be only for the materials you are disposing of as billed to us by the disposal company.

Packaging the Waste

Package the waste in a leak-proof container with a screw-top lid or other secure closure. Snap caps, such as those found on milk bottles, wrong size caps, parafilm, or other loose fitting lids are not acceptable.

Solid debris can be packaged into sealed plastic bags. Do not use biohazard bags for chemically hazardous waste.

Clean visible contamination from outside of the container.

Labeling the Waste

Obtain and complete a Chemical Collection Request from the Plant Services Department. You can call us at extension 7250, or we can be reached via email at discustivesterm.cc.or.us.

COMPLETING the CHEMICAL COLLECTION REQUEST

Fill out the following information legibly:

Name: This is the person we contact if we have questions about the waste. He or she should be knowledgeable about the chemical characteristics of the waste and the processes used to generate the waste.

Date: State and federal law allows us to store waste on campus for no more than 90 days. If the container was used to accumulate waste, the date should give the last day waste was added.

Department: Departments are charged for waste disposal. Therefore, we need to track who generates Southwestern's chemical waste for billing and to help in pollution prevention planning.

Phone number: List the number where the generator can be reached.

Building and Room: Please list the building and room where the waste will be located when we arrive to pick it up, not your office.

Chemical Contents and Properties

Chemical Name and Common Name: Used as the basic identifiers for the waste product.

Constituents and Percentages: List all constituents in the container, including solvents and water, by full name, not by abbreviation, initials or chemical formula. Include their approximate proportions, which should add up to 100%. If the proportions are unknown, indicate that the container holds a mixture and identify the components as well as you can.

Properties, Number of Containers, Container Type: Follow the check-off and blank fill-in to complete these sections. They are very self-explanatory.

Quantity per Container: Indicate the amount of waste in the container, not the size of the container, using one of the following units of measure: liter (including ml, etc.), gallon, gram (including kg, etc.) pound. For example, two liters of waste in a four-liter container should be entered as two liters.

Total Quantity: Amount in all containers.

pH: Measure the pH. This is very important in classification of some wastes.

Major Hazards: Be sure to indicate all hazards. This information is available off of the original container label or the product MSDS.

Comments: Add any comments that you feel would be helpful in classification and handling of the material. Put in this section the information you would like to have added if you were the one charged with the disposal of the material.

The Plant Services Department representative picking up the material will complete the rest of the form

Arranging for Waste Pickup

Send a copy of the completed request to the Plant Service Department. Attach a copy of the request to the waste container. We will pickup the waste within a week of receiving the request.

Leave the marked containers in a visible place in the room noted on the request.

Problem Request Forms

While most Chemical Collection Requests we receive are usable, there are some common problems that create bad requests. And then there are some unusually ugly requests. Some common mistakes found on the requests include:

- Putting initials or the name of a lab in the section designated for the investigator/generator. We need to have an individual to contact if we have questions regarding the waste.
- Failure to list the building and room where the waste can be located.
- Failure to identify 100% of the chemical constituents.
- Failure to identify any of the constituents at all. Disposing of "unknown" chemicals is extremely expensive!
- Using chemical formulas to identify the chemical constituents in the waste. For clear communication and to comply with the applicable laws and regulations, the names of chemical constituents must be written out completely.
- · Using trade names, abbreviations, or "waste" instead of listing chemical constituents. Refer to the MSDS for the chemical constituents, or attach a copy of the MSDS with the waste.

Contaminated Requests

We receive requests that are contaminated with chemicals. Please keep in mind that we have to handle the requests when entering the data and creating packing lists. Chemically contaminated requests spread chemicals wherever they go. Additionally, these chemicals can obscure or erase the request's serial number.

Do not overfill containers. Prevent leakage by leaving empty space at the top of the containers. Wipe off dirty containers before affixing requests. If a container leaks, put it in another container, or transfer the waste to an intact one. If you need containers suitable for waste transport, contact us - we may be able to help.

If you need requests or have questions about how to use them, call us at extension 7250 or contact us by email. Help us by sending good requests, we'll take care of the rest.

HAZARDOUS WASTE DISPOSAL GUIDE

Office and Shop Waste

Both office and shop settings typically utilize products that are found also in homes. Environmental regulations allow homeowners greater leeway in disposal of materials than in the workplace environment. What people are used to legally throwing away at home may not be legal to do at work.

Aerosol Cans

All aerosol cans are considered hazardous waste until completely empty and punctured.

Campus departments may purchase devices to open aerosol cans and drain contents, except for can with pesticides or other highly toxic materials. Cans will be picked up as with other hazardous wastes.

Departments that produce a lot of aerosol cans are encouraged to purchase their own opening device, in consultation with the Plant Services Department.

Office Products

In the past, correction fluid (white out), duplicating fluid, glues, and various thinners for these products were extensively used in offices. With the advent of word processing systems and photocopiers, the use of these solvent-based products has decreased. Containers that are not completely dry are typically hazardous waste when disposed. In addition, toner fluid (for copiers and printers) may be hazardous, depending on constituents. Inks used for stamp pads or certain pens are typically hazardous.

Cleaning Products

Many cleaning products have a high or low enough pH to qualify as hazardous waste. Any cleaning product that smells of ammonia is likely to be above the pH allowed for sewer disposal under Coos Bays drain disposal regulations. This does not affect the use of these products as intended, but should be kept in mind when getting rid of old or outdated stocks. In addition, many cleaning products contain solvents that may be classified as hazardous waste when disposed.

Rags

Rags that are to be used for solvent-based purposes should be purchased, when possible, through a laundering service that includes laundering the rags. If this is not feasible, rags with flammable solvents or hazardous constituents should be collected in flammable rag containers and disposed as hazardous waste.

Paint

Paint is typically hazardous before drying. The use of lead and mercury in paint has largely disappeared, but the solvents used in both latex and oil-based paints are usually hazardous. Excess unopened or scarcely used paint in good condition should be offered as surplus property. Paint that has been opened should only thrown away if it is completely dry. If not dry, it can be painted on something or disposed as hazardous waste.

WASTE REDUCTION

Waste Costs

The cost to dispose of hazardous chemical waste will often exceed the original purchase price of a chemical or chemical product. The College encourages waste generators to use waste reduction techniques. If followed, the techniques listed below will help reduce the volume of waste, which will have a corresponding effect of the cost of disposal. Because the costs are variable, they are not listed here.

In addition to disposal costs, there are fines from regulatory agencies for not properly handling waste materials. These fines can be as much as \$10,000 per day, and are closely tied into storage and labeling guidelines.

Purchasing

Purchase chemicals to match anticipated needs. This aspect of waste and cost reduction is frequently overlooked. A substantial portion of hazardous waste generated at Southwestern consists of chemicals that are in original containers, and are unused or of questionable purity due to previous use. Projected savings from purchasing chemicals in a larger size are often offset by costs for disposal of unused portions of larger bottles, especially those with a limited shelf life. It may not be possible to exactly determine future needs, but any effort will be beneficial.

Change Procedures

A procedure that uses a hazardous substance can often be modified to lessen the hazard or amount of waste products resulting from that procedure. In many cases, a less hazardous material can be substituted and perform as well. An example is substituting a commercial lab glass cleaner (e.g. NOCHROMIX) in place of chromic acid cleaning solution. The resulting mixture is still hazardous because of its corrosive properties, but has no toxic chromium and can therefore be neutralized. Reactive substances, those that react with water or air or are unstable, are especially troublesome disposal items. Disposal costs associated with picric acid, for example, can be as much as ten times the original purchase price.

Unknowns

Unknowns are difficult and expensive to dispose. Unknowns can be prevented by good record keeping and labeling, which includes designation of constituents and percentages. If unknowns are found, the responsible department must make every effort to identify the material. If this is not possible, then the responsible department will be billed for the cost of identification or classification required for disposal of the unknown chemical, in addition to disposal costs.

Recycling

Chemical recycling is possible if material is in unopened containers or partially used original containers and of high quality. These materials are made available to interested parties as Southwestern. Be careful not to obliterate any parts of labels. Chemicals and chemical products should not be given or sold to the general public or offered as surplus property. Commercial chemical products may be offered for surplus if reasonable cautions are followed.

Segregate

Segregate wastes as much as possible. Mixing a low-cost disposal item with a higher one makes the entire lot a higher cost item.

STORAGE

The Storage of hazardous materials must be in compliance with federal and state regulations. Your methods of handling waste are subject to unannounced inspections by state regulatory inspectors.

All containers need to have a label at all time indicating contents. Fore waste materials, this could be a simple label such as "WASTE SOLVENT" or "USED ACETONE".

Put the label on the container BEFORE ADDING WASTE.

All containers need a lid at all times when not actively adding or removing waste.

Evaporation in a hood is not a legal disposal method. Funnels do not count as lids.

Secondary containment is advised for liquid containers.

Storage limits and locations are the same for waste as for new materials. For example, storage of flammable liquids in excess of 10 gallons requires a flammable liquid storage cabinet. Glass bottles may not be stored on the floor because accidental kicking can easily break them.

DISPOSAL

Contact the College Plant Services Department at extension 7250 for the disposal of:

- aerosol cans
- asbestos
- batteries
- biohazards and sharps
- · chemical waste
- pump oil
- photographic fixer
- unused paint
- empty rinsed recyclable glass

NON-HAZARDOUS WASTES, TREATMENT, RECYCLING

Non-hazardous Chemicals

Solids should be collected in disposable, non-leaking containers, labeled with contents, clearly marked as non-hazardous, and prepared for disposal.

The Plant Services Department will accept any well identified non-hazardous waste for no charge; it can alternatively be placed into the campus garbage collection system.

Solutions containing only non-hazardous, water miscible liquid materials, pH between 6 and 9, can be disposed through the sewer system. Remember though, that "hazardous" includes flammable liquids even if water-soluble.

If questions arise as to a specific chemical's hazard status, contact the Plant Services Department.

The items listed below are considered NON-hazardous.

- Acetates: Ca, K, Na, K, Mg, NH4
- Naturally occurring amino acids and salts
- Citric acid and salts of Na, K, Mg, NH4, Ca
- Bicarbonates: Na, K
- Borates: Na, K, Mg, Ca
- Bromides: Na, K, NH4
- Carbonates: Na, K, NH4
- Chlorides: Na, K, Mg, Ca, NH4
- · Lactic acid and salts of Na, K, Mg, NH4, Ca
- Sugars and sugar alcohols
- Starch
- lodides: Na, K, Ca
- Oxides: B, Mg, Ca, Al, Si, Fe, Zn
- Phosphates: Na, K, Mg, Ca, NH4
- Silicates:Na, K, Mg, Ca
- Sulfates: Na, K, Mg, Ca, NH4

Chemical Recycling is possible if material is in unopened containers or partially used original containers and of high quality.

- These materials are made available to interested parties at Southwestern. Be careful not to obliterate any parts of labels.
- Chemicals and chemical products should not be given or sold to the general public or offered as surplus property.
- Commercial chemical products may be offered as surplus property if reasonable cautions are followed.

Chemical Treatment

Neutralization can be performed on wastes which are hazardous only because they are corrosive (acids, bases).

A neutralized solution should have a final pH value between 6 and 9. Corrosive waste should not be discharged through the sewer system.

The Southwestern Plant Services Department staff can neutralize corrosive materials, if necessary, and may be able to provide generators with appropriate neutralization materials. Treatment of other materials to lessen the hazard or amount of a waste can be included as part of standard operating procedures in laboratories. Such procedures should be written and made a part of specific experimental protocol.

Chemical Waste Disposal

Hazardous chemical waste refers to any material substance that is:

CORROSIVE (pH<2 or pH>12)

REACTIVE (oxidizers, water reactive)

FLAMMABLE (flash point <140 F)

TOXIC

Hazardous waste is incinerated (at off-site locations). The Plant Services Department is charged for the cost of hazardous waste disposal, so departments are encouraged to employ waste reduction procedures to limit costs. Use the following guidelines to dispose of hazardous chemical wastes.

Containers

All waste must be in appropriate NON-LEAKING containers with lids that are non-leaking, tight fitting and are not cracked, broken, or chemically damaged.

The container size should match the amount of waste.

Containers must be compatible with the waste contained.

Liquid containers must be less than 5 gallons and weigh less than 45 pounds.

Paper or cardboard primary containers should be put into sealed plastic bags.

Except for common solvents, which can be bulked together, waste disposal charges are related to container volume rather than solely a weight basis; a partially full container may cost the same as a full one.

Labels

All unused chemicals in original non-leaking containers with manufacturer's label will be accepted as is.

All other waste require an orange hazardous waste label, available from the Plant Services Department, which must be completed and attached to each waste container, except for very small containers.

Labels should be affixed in a manner that does not cover existing labels or markings.

Packing

Generators should find cardboard boxes and make them available to the Plant Services Department staff at the time of waste removal.

DO NOT pack waste in boxes, since waste containers will be examined by visual inspection.

The Plant Services Department staff will pack waste in boxes according to compatibility.

Boxes should be sealable when necessary, and sturdy enough to transport the material.

Boxes exceeding 45 pounds or 18 inches on a side cannot be safely handled by one person, and will not be picked up.

Pickup

To request waste pickup call the Plant Services Department at extension 7250, use the hazardous waste pickup form, or send an email with your request to:

inckinev@southwestern.co.or.us

In all cases, furnish the following information:

name
phone
department
pickup location (building and room number)

You will be notified by Plant Services of pickup date and approximate time (usually within 1 week).

Specific Wastes:

Aerosol Cans

All aerosol cans are considered hazardous waste until completely empty and punctured.

Campus departments may purchase devices to open aerosol cans and drain contents, except for cans with pesticides or other highly toxic materials. Cans will be picked up as with other hazardous wastes. Departments that produce a lot of aerosol cans are encouraged to purchase their own opening device, in consultation with the Plant Services Department.

Photographic Darkroom Chemicals

Used photographic chemicals are typically non-hazardous waste, but may not be; common contaminants would include silver and chrome. In addition, many darkroom chemicals are outside the allowable pH levels for disposal as non-hazardous waste.

<u>Used Oil</u>

Used motor oil from internal combustion engine processes is recycled through the Plant Services Department. All used oil produced in laboratory operations, including pump oil, must be disposed of through the hazardous waste disposal program. Identification of possible contaminants is essential.

Organic Solvents

Organic solvents can be combined and reused for (off-site) fuel or solvent recovery. There is no minimum amount needed for requesting disposal. If organic solvents are mixed with other chemicals the mixture will become unsuitable for heat recovery and costs will increase. "Other chemicals" include halogenated solvents, acutely toxic flammables, acids, bases, heavy metals, oxidizers, and pesticides. Halogenated solvents should be separated from other liquids for solvent recovery.

Infectious Waste

Infectious waste must be disposed of in a carefully controlled manner in accordance with regulations administered by both the Oregon DEQ and the Health Department. Infectious wastes must either be incinerated or treated prior to disposal. Infectious waste has been defined to include biological waste, cultures and stocks, pathological waste, and sharps. The

term infectious waste is synonymous with biohazard. The term does NOT include chemical agents, such as carcinogens, which cause affects living organisms through chemical means.

DEFINITIONS

Biological Waste

Includes blood and blood products, excretions, exudates, secretions, suctioning and other body fluids that cannot be directly discarded into the municipal sewer system, but EXCLUDES articles contaminated with fully absorbed or dried blood. Biological waste must either be incinerated or sterilized with steam in a dedicated autoclave. After treatment, biological waste may be treated as normal refuse.

Cultures and Stocks

Include etiologic agents and associated biologicals, including specimen cultures and dishes and devices used to transfer, inoculate and mix cultures. The definition also includes wastes from the production of biologicals, serums, and discarded live or attenuated vaccines. Cultures and stocks must be treated in the same way as biological waste.

Sharps

Includes needles, scalpel blades, lancets and syringes that have been removed from their original sterile containers. Sharps must be incinerated. The definition DOES NOT exempt needles or syringes used for non-infectious materials, such as transferring chemical solutions.

DISPOSAL

Those wastes that must be incinerated must be collected and take to a DEQ permitted infectious waste incinerator. Those which may be disposed in the ordinary trash should be clearly marked "NON-INFECTIOUS" or "STERILE" and put inside outer packaging which is NOT red or orange in color. AUTOCLAVES used for infectious waste treatment must be designated and tested.

Users must develop written operating procedures, keep records which detail parameters for treatment, methods for monitoring, methods for indicating adequate sterilization conditions during each treatment, and monthly tests of sterilization conditions using a specified biological indicator.

The Plant Services Department will collect full sharps containers from campus locations. Generators will pay for the disposal of their sharps. Generators who anticipate having other infectious wastes which require incineration will need to contact an infectious waste disposal firm to arrange for a schedule for pickup from their lab. Call the Plant Services Department for contacts.

STORAGE

Infectious waste should be segregated from other wastes by putting in separate containers at the point of generation.

All containers should be located to minimize access by unauthorized persons and clearly identified as containing infectious waste.

Except for sharps, infectious waste should be stored in red plastic bags OR containers made of other materials impervious to moisture and strong enough to prevent tearing under normal use conditions.

Pathological, biological and culture/stock wastes should be treated or disposed with 7 days of generation or with 30 days if refrigerated or frozen.

If a generator (laboratory or department) produces less than 50 pounds of waste in a calendar month, the 7-day storage limitation does not apply.

SHARPS should be contained in leak proof, rigid, puncture resistant RED containers which have tight lids or are taped closed.

Sharps containers can be purchased from commercial vendors and are also available at Chemistry Stores

There is no limit on the length of storage for sharps.

GLASS RECYCLING

Glass at Southwestern is recycled through the Plant Services Department. The glass-recycling program should not be used as an avenue to circumvent the proper disposal of chemical wastes. including the residues of chemicals in containers. In order to avoid continuing problems associated with its collection, the following guidelines should help when preparing glass for recycling.

- 1. Clean glass of all chemical residues. Proper chemical disposal policies should be followed for chemical disposal. Employees who recycle glass must handle these containers, and should not be exposed to hazardous or unknown materials. Separation of glass by color is NOT necessary.
- 2. Remove lids from containers. If necessary to prevent rain accumulation, replace with foil caps or plastic wrap.
- 3. Keep broken glass to a minimum. Any clean broken glass should be loosely packaged to facilitate removal without exposing recycling employees to sharp edges. Broken bottles should be handled carefully.
- 4. Protect containers left out of doors to prevent rain accumulation inside them. Water inside bottles may be mistaken for a liquid chemical, and generally makes the recycling process more difficult. Turning bottles upside-down works well.
- 5. Pay careful attention to types of glass. Listed below are the types of glass that are NOT acceptable for recycling. Non-recyclable glass mixed with recyclable causes more difficulties for the recycling operation than any other.

Non-Recyclable Glass

1. Heat Resistant Glass, which includes borosilicate glass (hard glass or lab glass): corning Pyrex

Kim Kimball

Pasteur or volumetric pipettes alass tubina & rods microscopic slides and cover glasses

- 2. Plate Glass (window glass)
- 3. Automotive Glass

Empty Containers

Containers that have held hazardous substances are empty by definition when one of two conditions are met. For one group of materials, a container is empty when all contents have been removed by techniques ordinarily used for that type of material (e.g., pouring for liquids), and the container has less than 3% of the original contents. For another group, a container is only empty when it has been triple rinsed with a solvent capable of removing the remaining contents. Contact the Plant Services Department for specific discussions of which group a material falls into.

In all cases, it is worthwhile to remove as much of the contents as possible before disposal (including recycling). For liquids, this would be turning the container upside down and letting it drain until no more drops will come out.

EMERGENCIES

HAZARDOUS IMATERIALS SPILLS are an inevitable part of most work environments. To effectively combat spills, it is necessary to prepare for them beforehand. Whenever employees work with a substance, they should be aware of its characteristics, and should have formulated plans of what to do in case of a spill, including what steps to take, who to call for assistance, what personal protective equipment is necessary, and what material is appropriate content with a spill, and where to find appropriate spill-response equipment. The chemical spill response capability available from the Plant Services Department does not lessen the responsibility of work groups to prepare plans to deal safely with small spills. Departments are encouraged to have spill response kits at strategic locations.

HAZARDOUS WASTE EMERGENCY INFORMATION

In the event of an emergency, the following numbers should be called as needed.

EMERGENCY NAME:

Dave McKiney - Maintenance Supervisor

PHONE:

888-7250 or 266-1392

ALTERNATE NAME:

Public Safety

PHONE:

888-7911 or 290-0016

FIRE DEPT .:

9-9-1-1

HOSPITAL:

Bay Area Hospital

541-269-8085

POLICE:

9-9-1-1

Spill control equipment is located: with the Plant Services/Public Safety Department. Call the Emergency number (x7250 or x7911) for assistance.

NATIONAL RESPONSE CENTER 1-800-424-8802

OREGON EMERGENCY RESPONSE SYSTEM 1-800-452-0311

REPORTING

The Plant Services Department at Southwestern can be contacted for assistance in dealing with a chemical spill by calling extension 7250 or the emergency number 7911. The Oregon DEQ has established regulations requiring the College to submit reports for chemical spills over certain specified amounts.

All large spills of a hazardous chemical (more than 1-gallon liquid or 1 pound solid) must be reported promptly to the Plant Services Department, who will make the report to DEQ if necessary. Reporting smaller spills is not required, but encouraged; Plant Services will respond appropriately to reports of any size spill.

Mercury

The Plant Services Department's response capabilities include a vacuum designed for cleaning up mercury spills. To aid that effort, do not spread other chemicals or absorbent materials on mercury spills. Doing so will make it more difficult to clean up the mercury and increase the disposal cost of contaminated debris.

Procedures

If the risk assessment suggests you can safely and properly clean up the spill (if not, call the Plant Services Department)

- 1. Get personal protective equipment (PPE). Do not attempt spill response until you have put on PPE appropriate for the situation. Available equipment may include respiratory protection, goggles, gloves, impervious shoes/boots, and body protection. All equipment will not be necessary for every situation, but should be available. If you are unsure about your ability to control a spill, get assistance. Any spill for which respiratory protection is needed must not be conducted without backup personnel equipped in the same manner. This level of spill should be left to the College's Plant Services Department.
- 2. Get spill control equipment from your department's spill kit. Spill control materials are sold in two general forms: loose materials (vermiculite, cat litter) and spill control pillows, which are produced in various shapes and contain different types of absorbents. Spill control pillows are preferred because they are much easier to pick up when finished. Also available are materials designed for specific types of chemical spills such as acids or solvents. In general, spilled liquids present more danger than solids, and quick response is therefore critical. For flammable liquids, special attention should be paid to potential ignition sources in the vicinity.
- 3. Absorb the spill. If there is danger the spill may spread, dike the perimeter with absorbent, and then absorb. "Floor chemistry" should not be attempted. If you desire to perform simple neutralization/treatment schemes, first absorb and contain the material.
- 4. Collect the contaminated absorbent and put into a sturdy leak proof container. Close the container if there are volatile substances that may continue to pose a threat.
- 5. Dispose of the contaminated absorbent in the same manner you would dispose of the substance that was spilled. If the spilled chemical is hazardous, do not put the cleanup residue in the Dumpster. If hazardous, contact the College's Plant Services Department to dispose.

FIRST AID

In situations that require first aid treatment, call 9-9-1-1 from a College extension (911 from an outside line) to reach the Coos Bay Fire and EMS Dispatch. The Plant Services and Public Safety Departments should also be notified.

CHEMICAL COLLECTION REQUEST

Upon Completion, turn into the Plant Services Office or Call x 7250

Generator Information	
Name:	
Date:	·
Phone:	
Department:	
Building & Room:	
Chemical Contents & Properties	
Chemical Name:	
Common Name:	· · · · · · · · · · · · · · · · · · ·
Constituents	Percentage
1	
2	
3	
4. 5.	
Properties: [] Solid [] Liquid [] Gas	· .
Number of Containers:	
Container Type: [] Glass [] Metal [] Plastic	[] Fiber
Quantity per Container:[] mg [] gram [] Kg [] po	und [] mi
[] liter [] galion	
Total Quantity:	
pH:	
Major Hazards: [] Corrosive [] Explosive [] Flammable	[] Oxidizer
[] Poison [] AirWater Reactive	[] Other
Comments:	
Picked Up By:	All and the second of the seco
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Appendix K

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SUBJECT

Emergency medical technicians

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SUBJECTS (1-12 of 17)

The 60-Second EMT: Rapid BLS/ALS 1 Assessment, Diagnosis & Triage

Bosker, Gideon

St. Louis: Mosby Lifeline, c1996

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x, 259 p.: ili.; 22 cm

Circulation availability: No copies available

2 The Basic EMT: Comprehensive Prehospital **Patient Care**

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St. Louis, MO: Mosby, c2001 xxix, 926 p. : col. ill. ; 28 cm

Circulation availability: 1 copy available at SWOCC

Main stacks

3 **Emergency Medical Care.**

> Vancouver, Wash.: Media Resources, Inc., c1993 1 videocassette (38 min.) : sd., col. ; 1/2 in. + 1

instructor guide + 1 study guide

Circulation availability: 3 copies available at

SWOCC Video

4 **Emergency Medical Care.**

Save Acres 1

Vancouver, Wash.: Media Resources, Inc., c1993 1 videocassette (44 min.) : sd., col. ; 1/2 in. + 1 instructor guide + 1 study guide

Circulation availability: 3 copies available at

SWOCC Video

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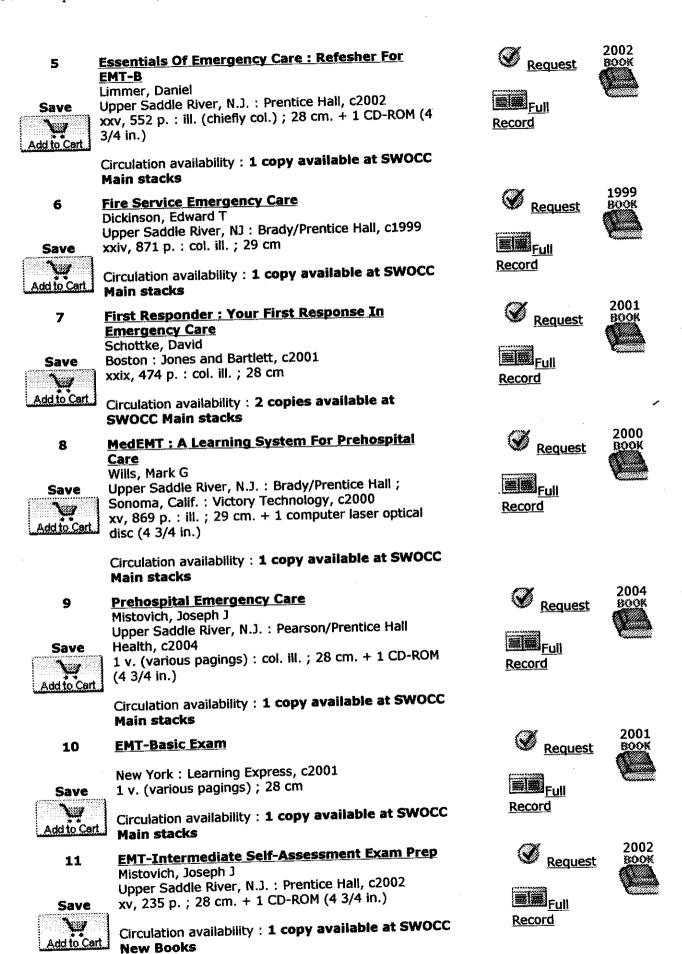
2001



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rage - or a



Mosby's EMT-B Certification Preparation And 12 Review

Request

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Mack, Daniel, 1960-

St. Louis, Mo.: Mosby, c2002 Save 188

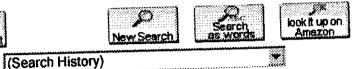
xii, 294 p. : ill. ; 28 cm

Circulation availability: 1 copy available at SWOCC Main stacks

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SUBJECTS (13-17 of 17)

The Streetmedic's Handbook 13

Philadelphia: F.A. Davis Co., c1996

xiv, 503 p.; 19 cm Save

Circulation availability: 2 copies available at

SWOCC Main stacks

Aehlert's EMT-Basic Study Guide 14

Aehlert, Barbara

Baltimore: Williams & Wilkins, c1998

xx, 760 p.: ill. (some col.); 28 cm

Circulation availability: 1 copy available at SWOCC dd to Cart

Main stacks

15 **Emergency**

[Carlsbad, Calif., Dyna Industries, etc.]

21 v. ill. 28 cm

Circulation availability: No copies available

dd fo Cart

16 **Geriatric Emergencies**

> Akron, Ohio: Emergency Training, 1991 1 videocassette (60? min.): sd., col.; 1/2 in

Circulation availability: 1 copy available at SWOCC

Video

17 **EMT Career Starter**

Hancock, Cheryl

New York: LearningExpress, c2001

xi, 223 p.; 26 cm Save

Circulation availability: 1 copy available at SWOCC

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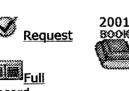
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SUBJECTS (1-12 of 210)

Adaptation Nursing: The Roy Conceptual Model 1 Applied Randell, Brooke





St. Louis: C.V. Mosby Co., 1982 Save xvii, 297 p.: ill.; 24 cm Add to Cart

Boca Raton: Lewis, 2003

347 p.: ill.; 26 cm



Circulation availability: 1 copy available at SWOCC Main stacks



Back Injury Among Healthcare Workers: Causes, Solutions, And Impacts





Circulation availability: 3 copies available at NORTH BEND New Book, SWOCC New Books and **COOS BAY New book**

Basic Patient Care Comfort And Hygiene





Irvine, CA: Concept Media, 1978 3 videocassettes (66 min.) : sd., col., 1/2 in. VHS + 1 Save quide ₹ Add to Cart

Philadelphia: J.B. Lippincott, c1996





Circulation availability: 4 copies available at **SWOCC Video**



Brunner And Suddarth's Textbook Of Medical-**Surgical Nursing**



xxxi, 2066, 78 p. : ill. (some col.) ; 29 cm. + 1 computer disk (3 1/2 in.)



4

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Circulation availability: 1 copy available at SWOCC Main stacks

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Fundamentals Of Nursing: Concepts, Process, 12 **And Practice**

⊘ Request

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Upper Saddle River, N.J.: Prentice Hall Health, c2000 Save xxiv, 1479 p. : ill. (some col.); 28 cm

Circulation availability: 1 copy available at SWOCC Main stacks

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SUBJECTS (13-24 of 210)

13 **Life Support: Three Nurses On The Front Lines** Gordon, Suzanne, 1945-

Boston: Little, Brown, c1997

Save xxiii, 328 p.; 25 cm

Circulation availability: 1 copy available at SWOCC dd to Cart Main stacks

14 Medical-Surgical Nursing: Clinical Management For Positive Outcomes

Save Philadelphia: W.B. Saunders, c2001

xxv, 2310, I1-I74 p. : ill., ports. ; 29 cm. + 1

computer optical disc (4 3/4 in.)

Circulation availability: 1 copy available at SWOCC

Main stacks

15 Mosby's Clinical Nursing

St. Louis: Mosby, c2002

xxvii, 1652 p.: ill. (some col.); 29 cm

Circulation availability: 1 copy available at SWOCC dd to Cart

Main stacks

16 Notes On Nursing: What It Is, And What It Is

> Nightingale, Florence, 1820-1910 Philadelphia: Lippincott, 1946

79 p. 22 cm

Circulation availability: No copies available

17 Nursing Approach To The Evaluation Of Child Maltreatment

Save

St. Louis: G.W. Medical Pub., c2003 xxvii, 480 p.: ill. (chiefly col.); 25 cm

Circulation availability: No copies available

Request



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18	Nursing Care Of The Terminally III Amenta, Madaion O'Rawe	Request	1986 BOOK
Save	Boston: Little, Brown, c1986 xvii, 409 p.: ill.; 24 cm	Full	
Add to Cart	Circulation availability: 1 copy available at SWOCC Main stacks	Record	
19	Nursing In Today's World : Challenges, Issues, And Trends Ellis, Janice Rider	Request	1995 BOOK
Save	Philadelphia: Lippincott, c1995 xii, 527 p.: ill.; 23 cm	Full Record	
Add to Cart	Circulation availability: 1 copy available at SWOCC Main stacks		
20	Nursing Interventions : Effective Nursing Treatments	Request	1999 800K
Save	Philadelphia : Saunders, c1999 xix, 747 p. : ill. ; 27 cm	Full Record	/
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21	Nursing Perspectives & Issues Grippando, Gloria M Albany, N.Y.: Delmar Publishers, c1986	Request	1986 BOOK
Save	x, 422 p. : ill. ; 24 cm	Full Record	
Add to Cart	Circulation availability: 1 copy available at SWOCC Main stacks	<u>IXCCOTA</u>	2002
22	Pathophysiology: The Biologic Basis For Disease In Adults & Children	Request	8008 8008
Save	St. Louis : Mosby, c2002 xxvi, 1616 p. : ill. (some col.) ; 29 cm	Full Record	C
Add to Cart	Circulation availability: No copies available		
23	Pharmacology For Nursing Care	Request	1990 500K
Save	Philadelphia: Saunders, 1990 xxxii, 1077 p.: ill. (some col.); 29 cm	Full	V
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24	Understanding The Nursing Process: The Next Generation	Request	1994 BOOK
Save Name of the Cart	Murray, Mary Ellen New York: McGraw-Hill, Health Professions Division, c1994 xii, 171 p.: ill.; 23 cm. + booklet	Full Record	
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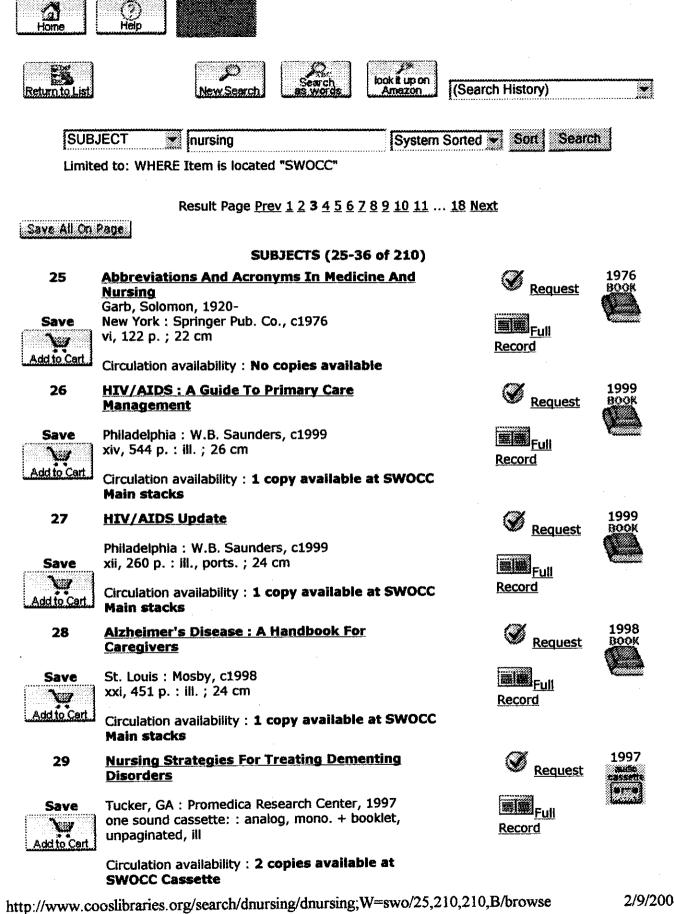
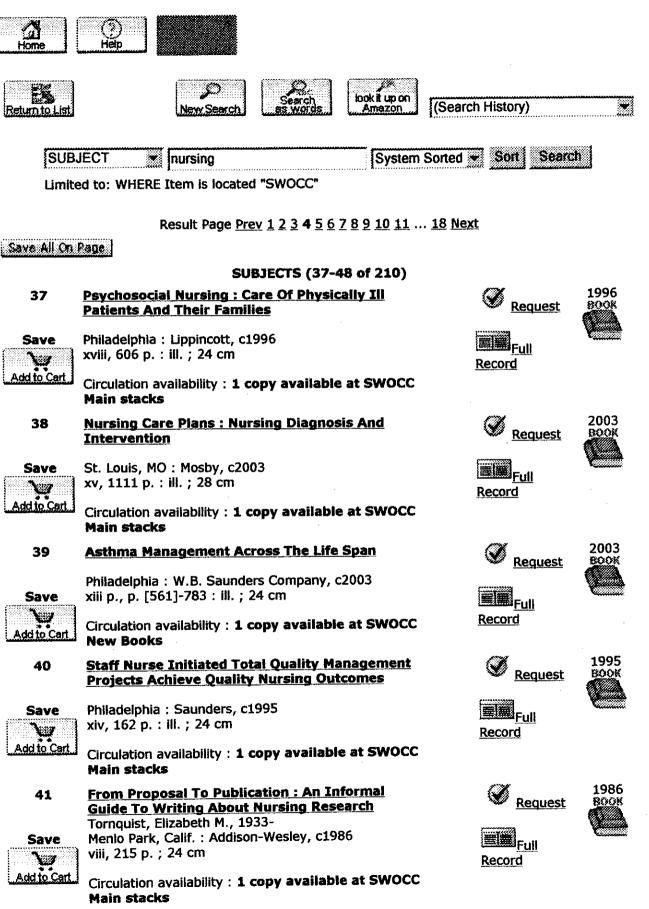


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30	Successful Communication With Alzheimer's Disease Patients: An In-Service Training Manual	Request	1997 BOOK
Save	Santo Pietro, Mary Jo Cook, 1945- Boston: Butterworth-Heinemann, c1997 xxiv, 288 p.; 28 cm	Full Record	V
	Circulation availability : 1 copy available at SWOCC Main stacks		
31	Clinical Applications Of Nursing Diagnosis : Adult, Child, Women's, Psychiatric, Gerontic And Home H	Request	2002 BOOK
Save Add to Cart	Philadelphia: F.A. Davis Co., c2002 xv, 752 p.: ill.; 28 cm	Full Record	
	Circulation availability: 1 copy available at SWOCC Main stacks		
32	Health Assessment: A Nursing Approach Fuller, Jill Philadelphia: Lippincott, c1990	Request	1990 BOOK
Save	xxvi, 600 p. : ill. ; 29 cm	Full Record	
Add to Cart	Circulation availability: 1 copy available at SWOCC Main stacks	Record	
33	Health Assessment & Promotion Strategies Through The Life Span Murray, Ruth Beckmann	Request	1997 800K
Save	Stamford, Conn. : Appleton & Lange, c1997 xvi, 896 p. : ill. ; 28 cm	Full Record	C
Add to Cart	Circulation availability: 2 copies available at SWOCC Main stacks		
34	Health Assessment In Nursing Practice Grimes, Jorge	Request	1996 BOOK
Save	Boston: Little, Brown, c1996 xvi, 592 p.: ill.; 28 cm	Full	
Add to Cart	Circulation availability : 1 copy available at SWOCC Main stacks	Record	
35	Health Assessment Of The Older Adult Eliopoulos, Charlotte	Request	1990 BOOK
Save	Redwood City, Calif.: Addison-Wesley Nursing, c1990 xiii, 322 p.: Ill.; 24 cm	Full	
Add to Cert	Circulation availability: 1 copy available at SWOCC Main stacks	<u>Record</u>	
36	Neuroscience Nursing For A New Millennium	W Request	1999 BOOK
Save	Philadelphia: W.B. Saunders, c1999 xii, 541-776 p.: ill., ports., charts; 24 cm	Full	
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Planning Guides

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xviii, 1014 p. : ill. ; 28 cm

St. Louis, Mo.: Mosby Year Book, 1996

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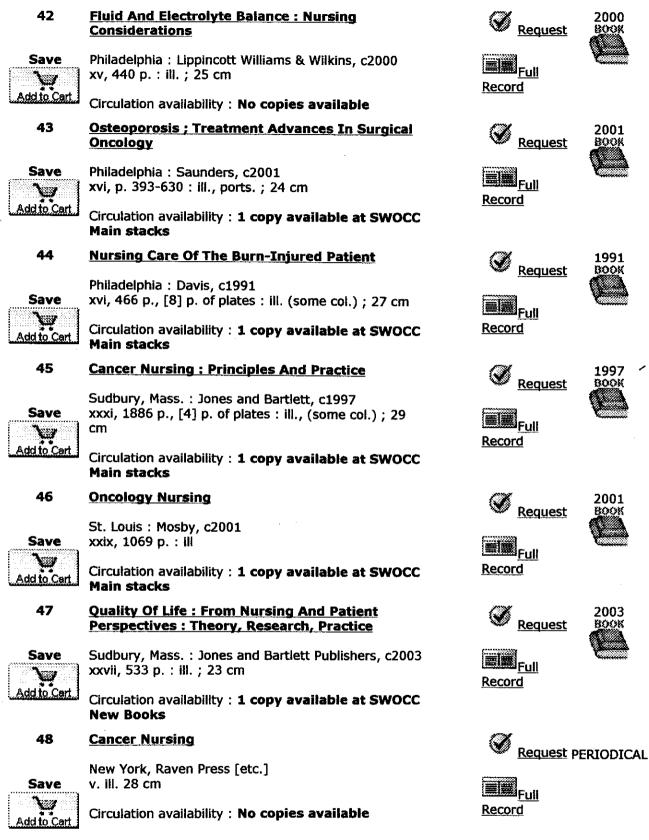
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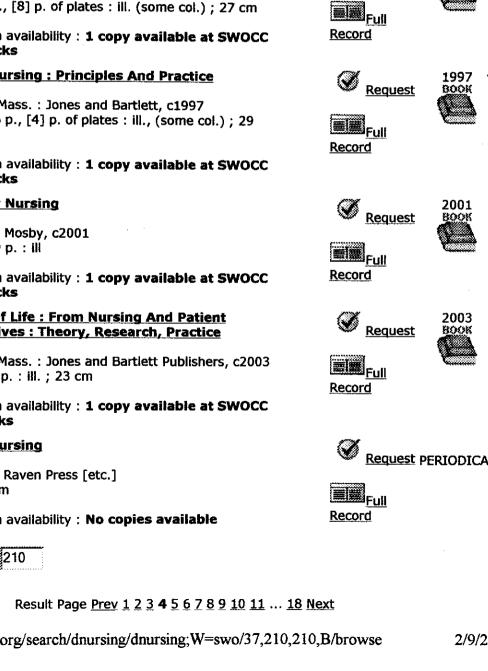
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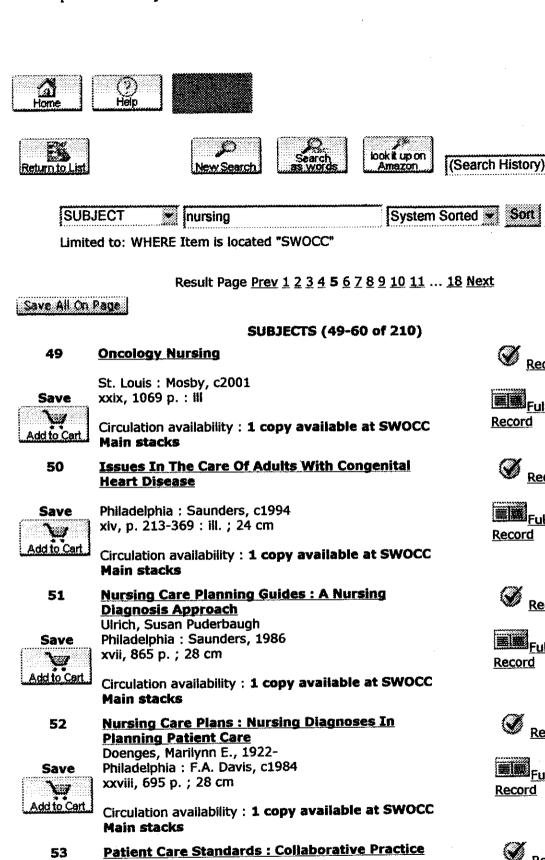
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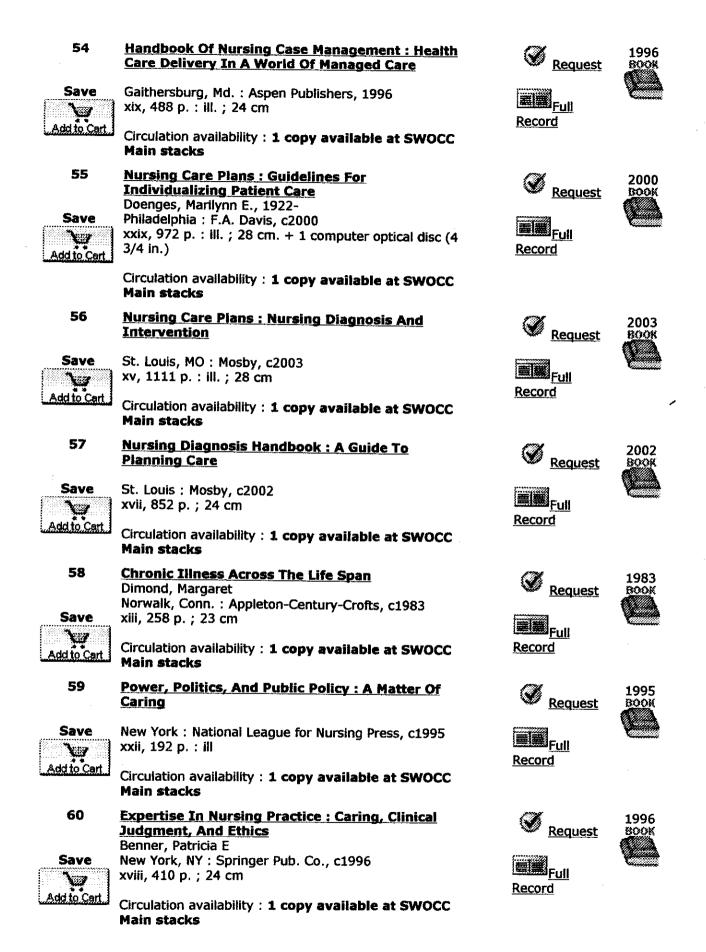


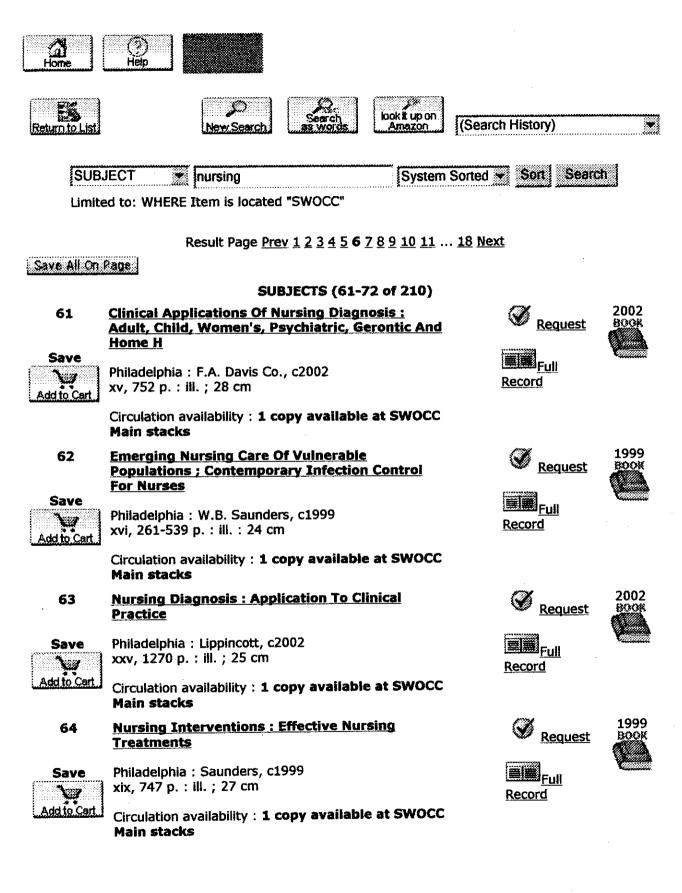


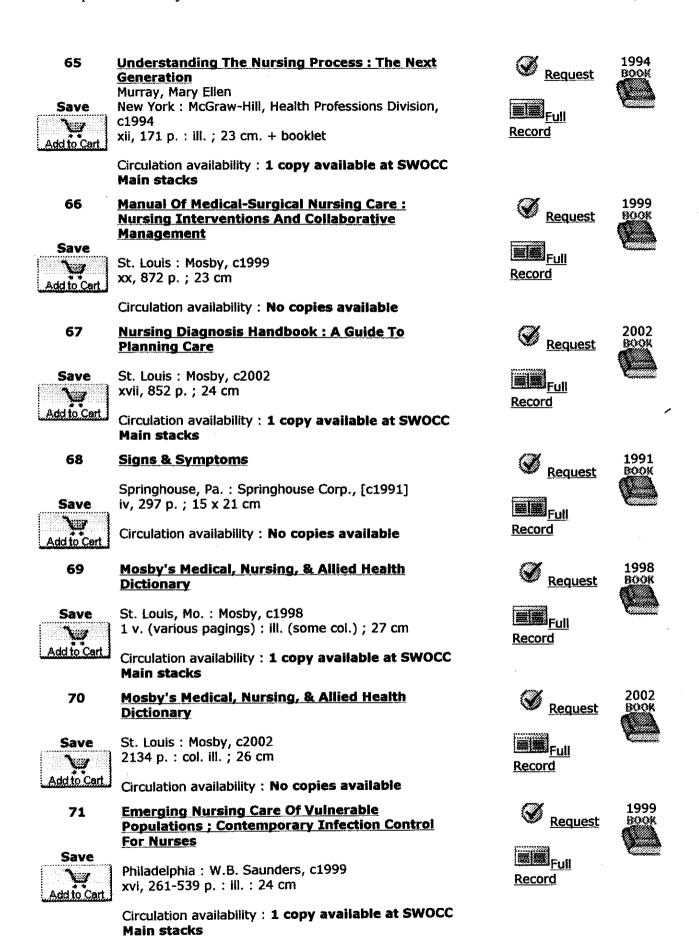


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Circulation availability: 1 copy available at SWOCC







72 <u>Handbook Of Nursing Case Management : Health</u> Care Delivery In A World Of Managed Care Request

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1996 BOOK

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Gaithersburg, Md.: Aspen Publishers, 1996

xix, 488 p. : ill. ; 24 cm

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SUBJECTS (73-84 of 210) 73 Endocrine Disorders Request Philadelphia: Saunders, c1996 Save vii, p. 689-886 : ill. ; 24 cm 100 Circulation availability: 1 copy available at SWOCC Record dd to Cart Main stacks 74 **Ethics For Nursing Practice** 1998 Request RONR Philadelphia: W.B. Saunders, c1998 Save xi, 239-386 p.: ill., port.; 24 cm Full Circulation availability: 1 copy available at SWOCC Record dd to Cart Main stacks 75 **Ethics In Nursing: An Anthology** 1990 Request New York, N.Y.: National League for Nursing, c1990

x, 344 P.:

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Circulation availability: 1 copy available at SWOCC Main stacks

76 **Ethics In Nursing Practice: A Guide To Ethical Decision Making**

Fry, Sara T Save

Geneva: International Council of Nurses, c1994 xii, 346 p. : ill. ; 21 cm

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Circulation availability: 1 copy available at SWOCC Main stacks

77 **Expertise In Nursing Practice: Caring, Clinical** Judgment, And Ethics Benner, Patricia E

Save dd to Cart New York, NY: Springer Pub. Co., c1996 xviii, 410 p.; 24 cm

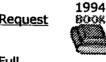
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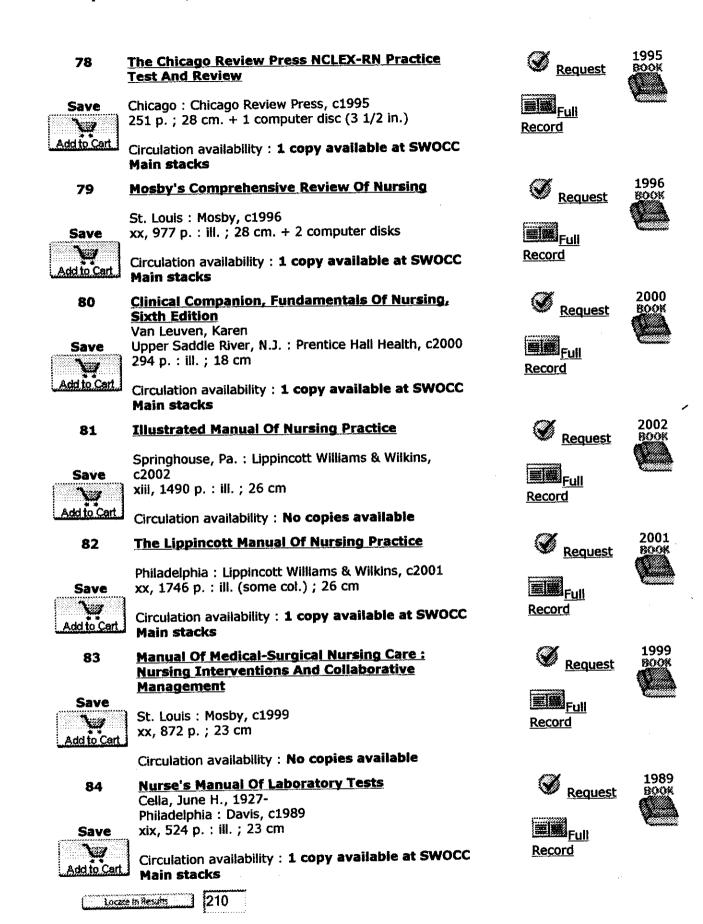


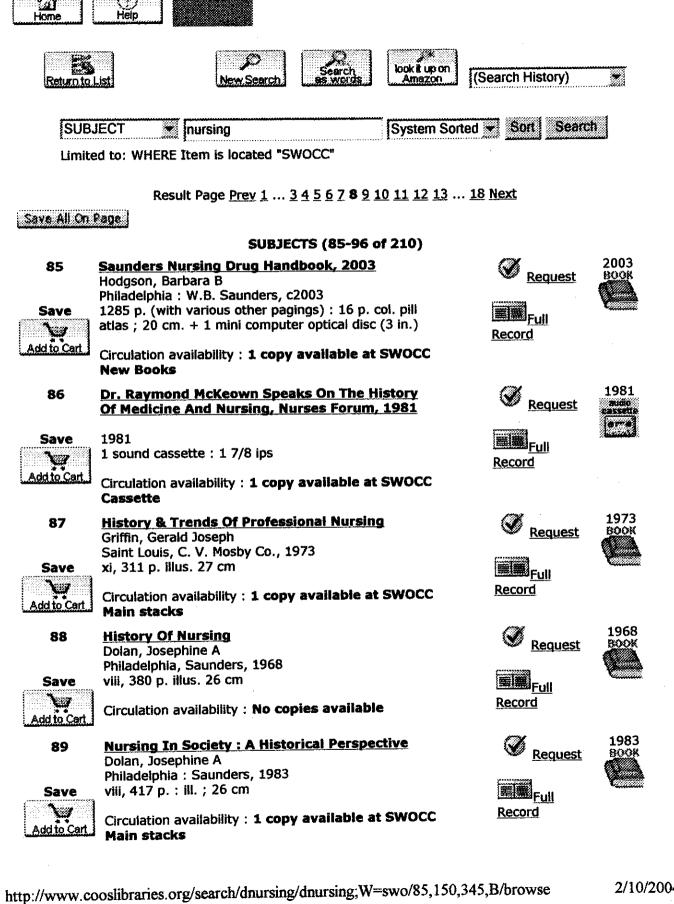


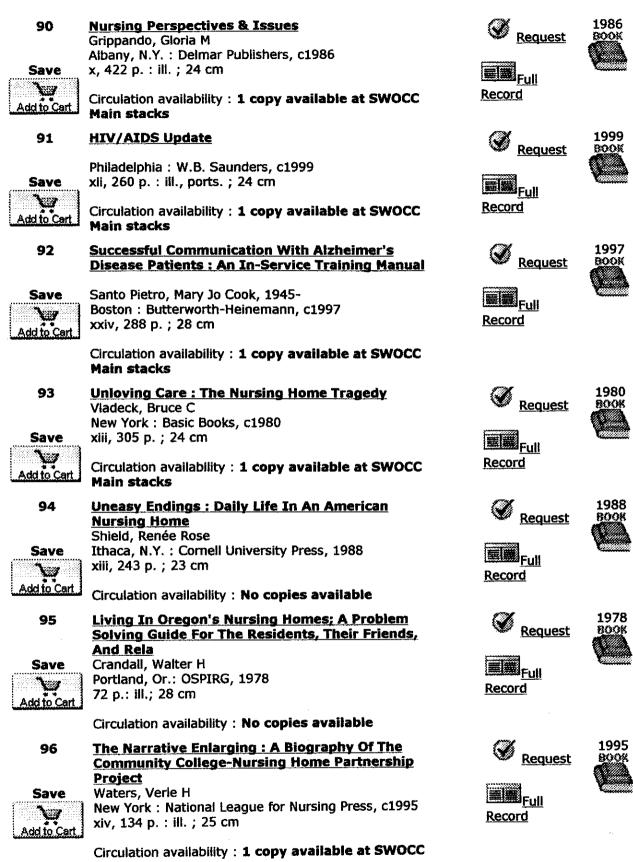






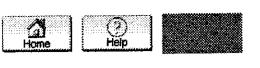






















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SUBJECTS (97-108 of 210)

Time To Care The Nursing Home Clinical

Request

Battle Creek, MI: W. K. Kellogg, 1991 1 videocassette (17 min.): sd., col.; 1/2 in Save V33#

Crandall, Walter H

72 p.: ill.; 28 cm

Health, [1976?]

Beaulieu, Elise M

ix, 288 p.; 23 cm

xx, 229 p.; 19 cm

Main stacks

New Books

Portland, Or.: OSPIRG, 1978

x, 134 p.: ill., forms; 28 cm

New York: Springer Pub., 2002

Old Age: The Last Segregation

New York: Bantam Books, 1971

Video



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98 Living In Oregon's Nursing Homes; A Problem Solving Guide For The Residents, Their Friends, **And Rela**

Circulation availability: 1 copy available at SWOCC

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Circulation availability: No copies available

A Guide For The Activity Coordinator In A Skilled **Nursing Facility** Holdeman, Elizabeth Bekke

Sacramento, CA: State of California Department of

Request

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Circulation availability: 1 copy available at SWOCC Main stacks

A Guide For Nursing Home Social Workers

Circulation availability: 1 copy available at SWOCC

Circulation availability: 1 copy available at SWOCC

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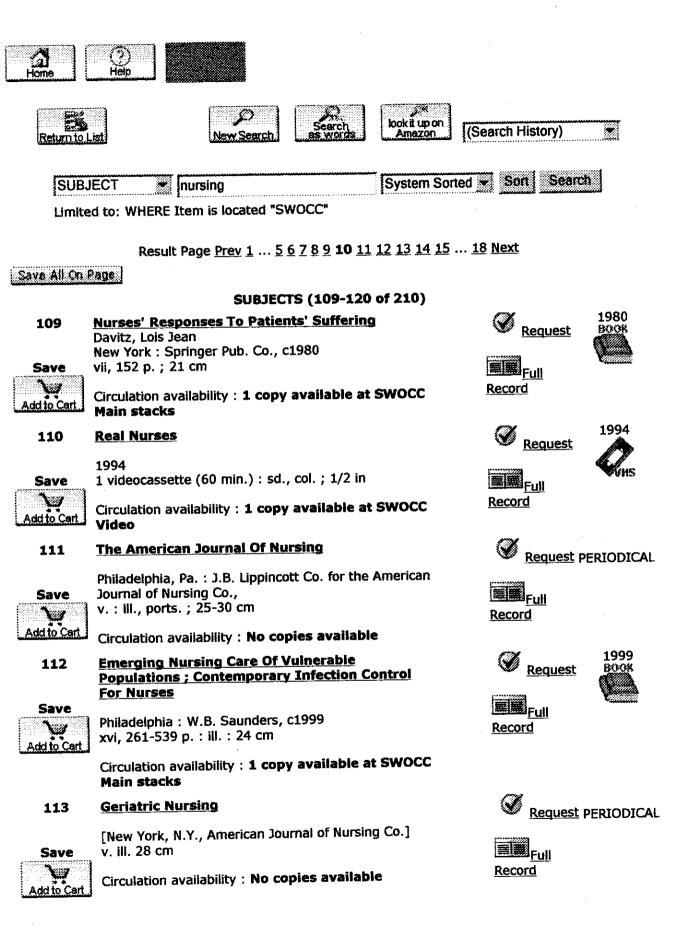
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102	<u>Uneasy Endings : Daily Life In An American</u> <u>Nursing Home</u> Shield, Renée Rose	W Request	1988 800K
Save Add to Cart	Ithaca, N.Y.: Cornell University Press, 1988 xiii, 243 p.; 23 cm Circulation availability: No copies available	Full Record	
103	Unloving Care: The Nursing Home Tragedy Vladeck, Bruce C New York: Basic Books, c1980	@ Request	1980 800K
Save Vi Add to Cart	xiii, 305 p.; 24 cm Circulation availability: 1 copy available at SWOCC Main stacks	Full Record	
104	Manual Of High Risk Pregnancy & Delivery Gilbert, Elizabeth Stepp St. Louis, Mo.: Mosby, c2003	Request	2003 BOOK
Save	xii, 740 p. : ill. ; 21 cm Circulation availability : 1 copy available at SWOCC	Full Record	
105	Main stacks Law Every Nurse Should Know Creighton, Helen	Request	1986 BOOK
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Add to Cart	Main stacks On Nursing : A Literary Celebration : An		1993
100	Anthology	Request Request	BOOK
Save Add to Cart	New York: National League for Nursing Press, 1993 xi, 355 p.; 23 cm	Full Record	C
: Add to Cart 3	Circulation availability: 1 copy available at SWOCC Main stacks		
107	Nurse's Book Of Advice : An Encyclopedia Of Answers To Hundreds Of Difficult Questions— Ethical, Leg	Request	1992 800K
Save Add to Cart	Springhouse, Pa. : Springhouse Corp., c1992 xv, 335 p. ; 26 cm	Full Record	***************************************
	Circulation availability : 1 copy available at SWOCC Main stacks		
108	Mosby's Comprehensive Review Of Nursing	Request	1996 800K
Save	St. Louis: Mosby, c1996 xx, 977 p.: ill.; 28 cm. + 2 computer disks	Full Property	
Add to Cart	Circulation availability : 1 copy available at SWOCC Main stacks	Record	



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114 **Journal Of Gerontological Nursing** Request PERTODICAL [Thorofare, N. J., C. B. Slack] Full Save ill. 28 cm 133 Record Circulation availability: No copies available Add to Cart 115 **Neuroscience Nursing For A New Millennium** Request Philadelphia: W.B. Saunders, c1999 Full Save xii, 541-776 p.: ill., ports., charts; 24 cm 100 Record Circulation availability: 1 copy available at SWOCC Add to Cart Main stacks 116 The Nurse Practitioner Request PERIODICAL Springhouse, Pa.: Springhouse Corporation Full Save v. ill. 28 cm Add to Cart Record Circulation availability: No copies available 117 Nursing Request PERIODICAL [Jenkintown, Pa.: Intermed Communications, c1971-Full Save v. : ill., ports. ; 28 cm Add to Cert Record Circulation availability: No copies available 118 **Nursing Research** Request PERIODICAL [New York, American Journal of Nursing Co.] Save v. diagrs. 29 cm Add to Cart Record Circulation availability: No copies available 119 Pediatric Advanced Practice Nursing. Request BOOK Rheumatology Full Philadelphia: Saunders, c2000 Save xv, p. 1-299 : ill., ports. ; 24 cm **** Record Add to Cart Circulation availability: 1 copy available at SWOCC Main stacks 120 RN Request PERIODICAL [Oradell, N.J., etc., Medical Economics Co., etc.] Save v. ill., diagrs. 23-28 cm Record Circulation availability: No copies available

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SUBJECTS (121-132 of 210) Journal Of Obstetric, Gynecologic, And Neonatal

Nursing: JOGNN

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[Philadelphia, PA]: Lippincott, [c1985-

v.: ill.; 28 cm

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122 Adaptation Nursing: The Roy Conceptual Model **Applied** Randell, Brooke

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St. Louis: C.V. Mosby Co., 1982 xvii, 297 p.: ill.; 24 cm

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Autonomy In Nursing Mundinger, Mary O'Neil

Germantown, Md.: Aspen Systems Corp., 1980 xiv, 222 p.; 24 cm

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Krieger, Dolores

Philadelphia, Pa.: Lippincott, c1981 x, 278 p.: ill.; 24 cm

Circulation availability: 1 copy available at SWOCC Main stacks

Nursing As Caring: A Model For Transforming 125 **Practice**

Boykin, Anne

New York: National League for Nursing, c1993 xxxii, 108 p.: ill.; 23 cm

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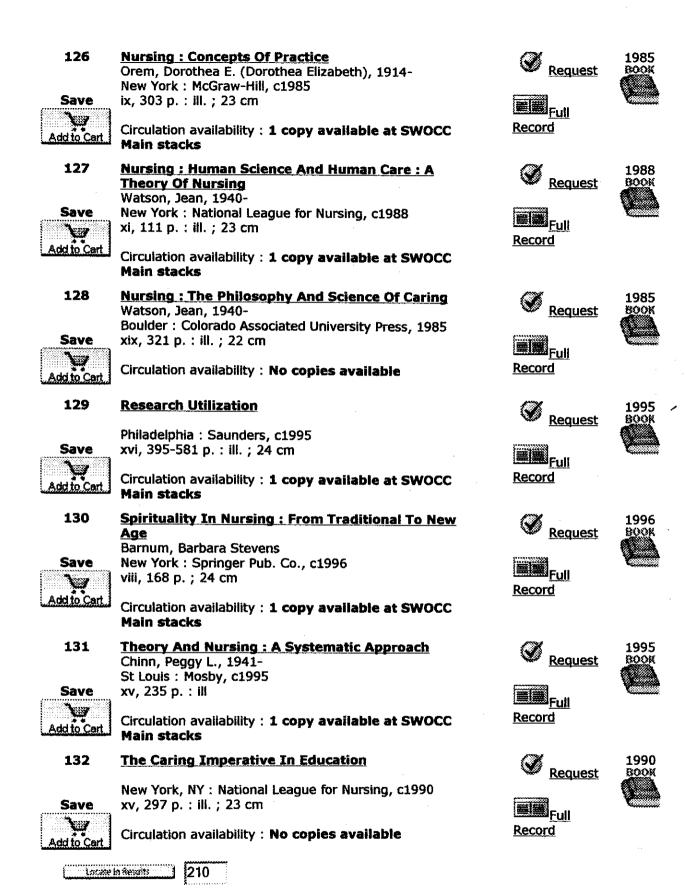
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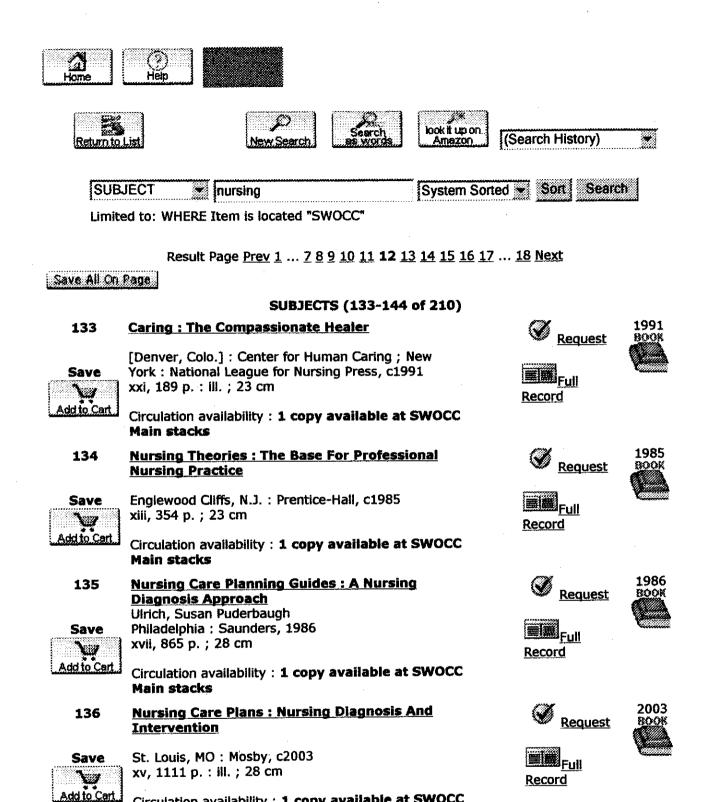
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137	Power, Politics, And Public Policy : A Matter Of Caring	Request	1995 BOOK
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138	Autonomy In Nursing Mundinger, Mary O'Neil Germantown, Md.: Aspen Systems Corp., 1980	Request	1980 800K
Save	xiv, 222 p. ; 24 cm	Full	
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139	Intellectual And Developmental Disabilities		2003
Save	Philadelphia: W.B. Saunders Co., c2003 xiv, 185-402 p.: ill.; 24 cm	Request	800K
Add to Cart	Circulation availability: 1 copy available at SWOCC Main stacks	Full Record	
140	Neuroscience Nursing For A New Millennium		1999
Save	Philadelphia: W.B. Saunders, c1999 xii, 541-776 p.: ill., ports., charts; 24 cm	Request	ВООК
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141	Nursing In Today's World : Challenges, Issues, And Trends	Request	1995 800K
Save	Ellis, Janice Rider Philadelphia: Lippincott, c1995 xii, 527 p.: ill.; 23 cm	<u>Full</u>	
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142	Osteoporosis ; Treatment Advances In Surgical Oncology	Request	2001 8008
Save	Philadelphia: Saunders, c2001 xvi, p. 393-630: ill., ports.; 24 cm	<u>Edm</u>	
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143	Pediatric Advanced Practice Nursing. Rheumatology	Request	2000 BOOK
Save	Philadelphia: Saunders, c2000 xv, p. 1-299: ill., ports.; 24 cm	Full	
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Philadelphia: W.B. Saunders Co., c2003

xii, 183 p. : port. ; 24 cm

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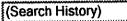
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145	Maternal/Fetal Nursing	Request	1996 800K
Save	Philadelphia : Saunders, c1996 ix p., p. 259-427 ; 24 cm	Full	
Add to Cart	Circulation availability : 1 copy available at SWOCC Main stacks	Record	
146	Manual Of High Risk Pregnancy & Delivery Gilbert, Elizabeth Stepp St. Louis, Mo.: Mosby, c2003	Request	2003 BOOK
Save	xii, 740 p. : ill. ; 21 cm	Full	
Add to Cart	Circulation availability: 1 copy available at SWOCC Main stacks	Record	
147	Essentials Of The Roy Adaptation Model	Request	1986
	Andrews, Heather A Norwalk, Conn. : Appleton-Century-Crofts, c1986	Request	
Save	xiii, 189 p. : ili., forms ; 23 cm	Full	C
Add to Cart	Circulation availability: 1 copy available at SWOCC Main stacks	Record	
148	Ethics In Nursing Practice : A Guide To Ethical Decision Making	Request	1994 800K
Save	Fry, Sara T Geneva: International Council of Nurses, c1994 xii, 346 p.: ill.; 21 cm	Full Record	
Add to Cart	Circulation availability: 1 copy available at SWOCC Main stacks		

Albany: Delmar Publishers, c1996

Save xvii, 156 p. : ill. ; 23 cm

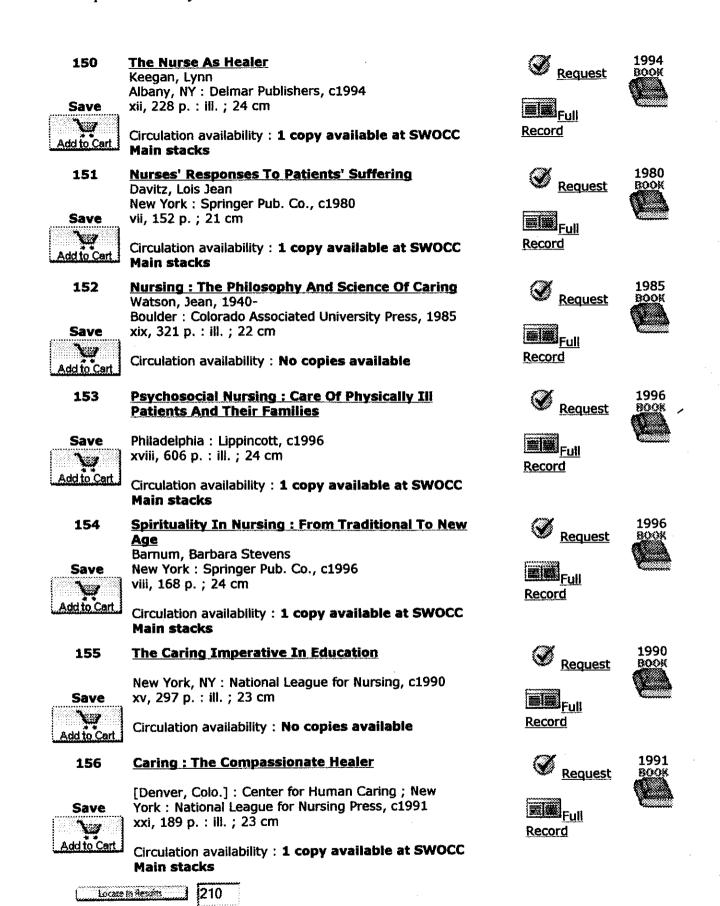
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xiv, 162 p. : ill. ; 24 cm

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Staff Nurse Initiated Total Quality Management **Projects Achieve Quality Nursing Outcomes**



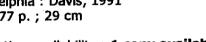
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Documenting Care: Communication--The Nursing Process And Documentation Standards



Fischbach, Frances Talaska Philadelphia: Davis, 1991 xxii, 677 p.; 29 cm



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Spirituality In Nursing: From Traditional To New

Circulation availability: 1 copy available at SWOCC

Circulation availability: 1 copy available at SWOCC

Nursing Documentation Handbook 159 Marrelli, T. M



St. Louis: Mosby, c2000 xxi, 472 p. : ill. ; 19 cm

Barnum, Barbara Stevens

viii, 168 p.; 24 cm

Main stacks

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New York: Springer Pub. Co., c1996

Philadelphia: W.B. Saunders, 1993

xvi p., p. 271-481 : ill. ; 24 cm

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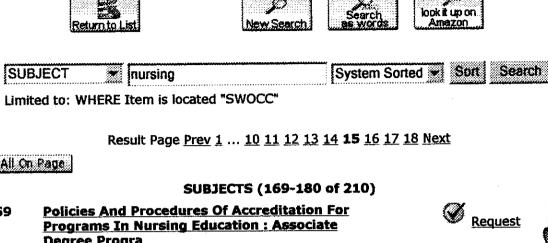
162	From Proposal To Publication: An Informal Guide To Writing About Nursing Research Tornquist, Elizabeth M., 1933-	Request	1986 800K
Save	Menlo Park, Calif.: Addison-Wesley, c1986		V.
No.	viii, 215 p. ; 24 cm	Record	
Add to Cart	Circulation availability: 1 copy available at SWOCC Main stacks		
163	Nursing Research : Methods, Critical Appraisal, And Utililization	Request	1994 800k
Save	St. Louis: Mosby, c1994		
Yez	xxi, 554 p. : ill. ; 24 cm	Full	
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164	Research Utilization	Request	1995 800K
	Philadelphia : Saunders, c1995	жецьезе	
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165	From Practice To Grounded Theory : Qualitative		1986 /
	Research In Nursing	Request	BOOK
S	Chenitz, W. Carole, 1946-		7
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166	Nursing Research: Principles And Methods	%	1995
	Polit-O'Hara, Denise Philadelphia: Lippincott, c1995	Request	BOOK
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167	Nursing Research	Paguest n	ERIODICAL
	[New York, American Journal of Nursing Co.]	** <u>Kequest</u> p	ERIODICAL
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168	Curriculum Revolution : Community Building		1991
	And Activism	Request	BOOK
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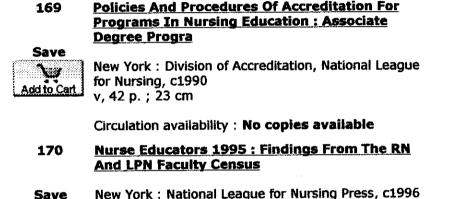
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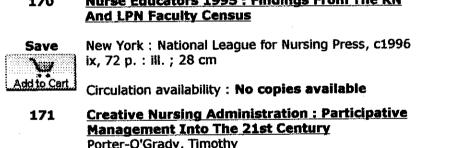


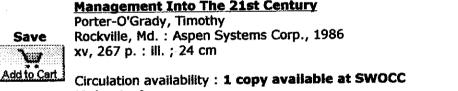




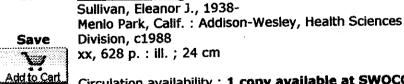


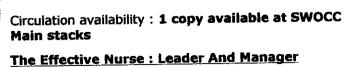




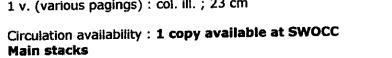








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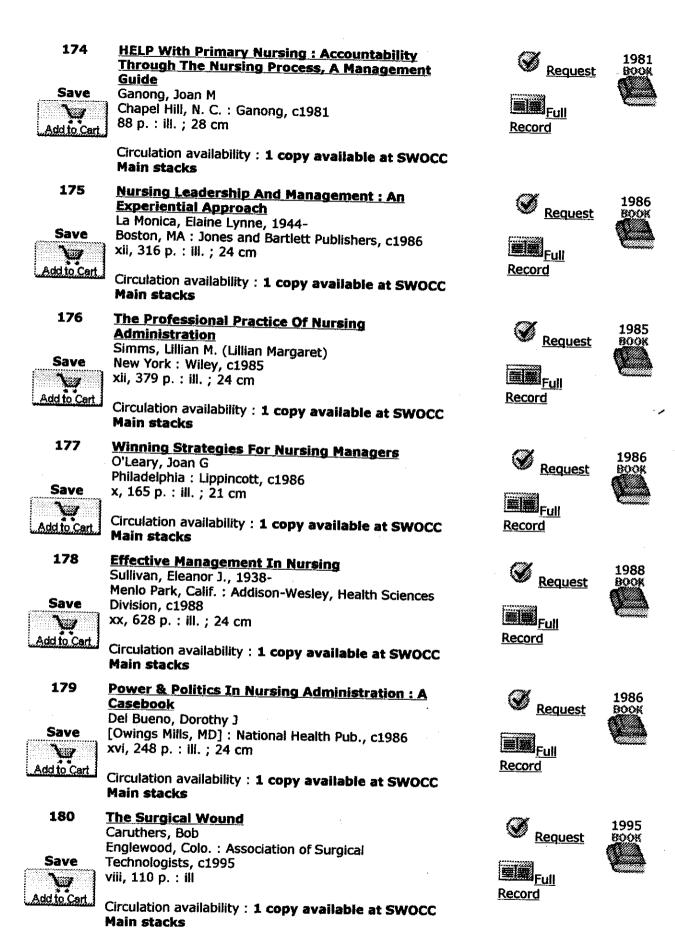
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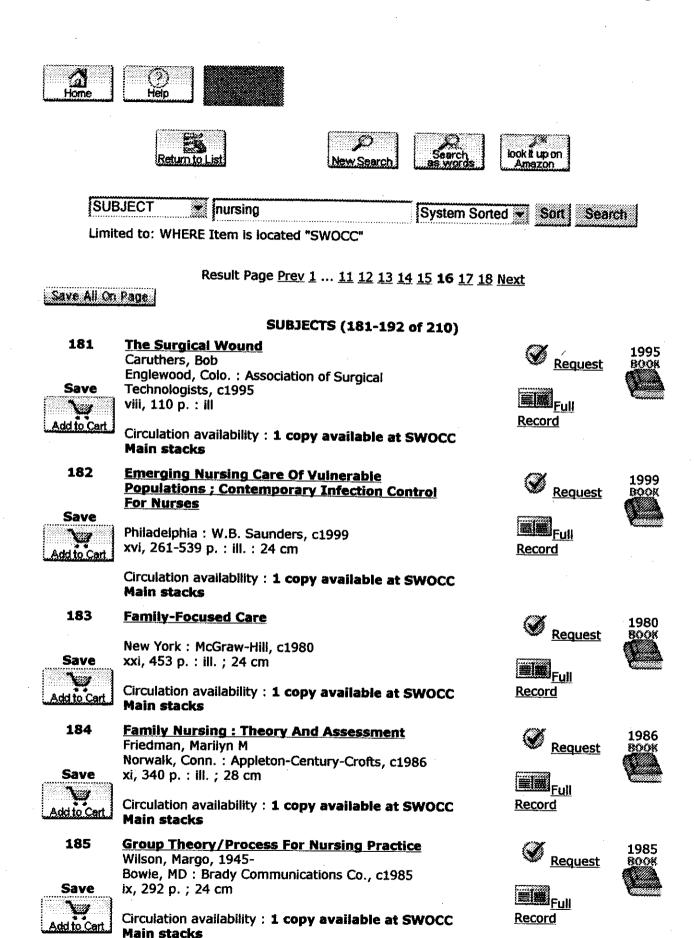
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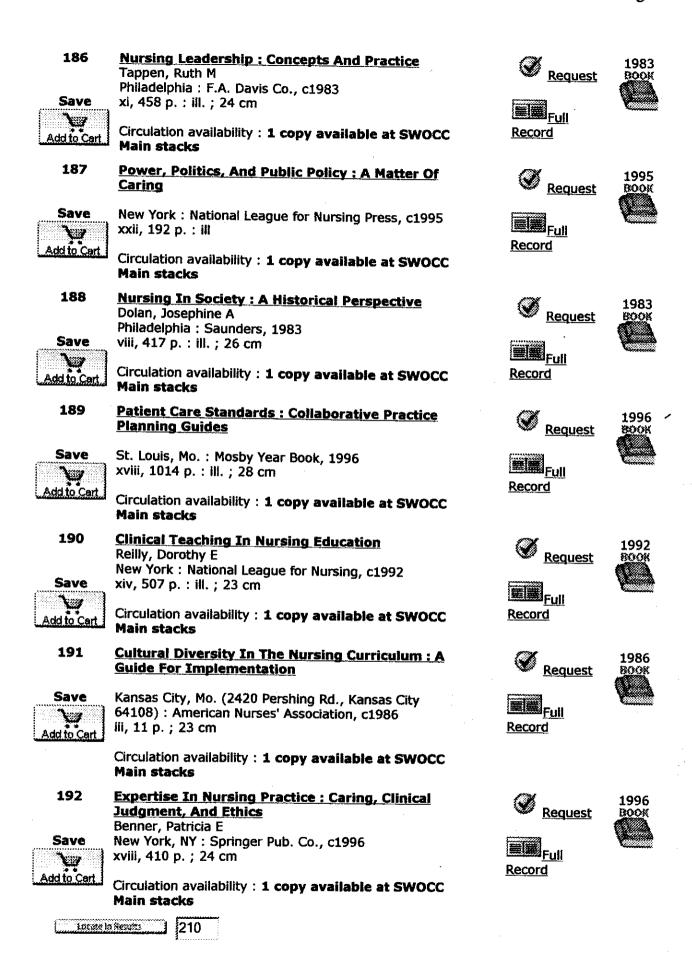
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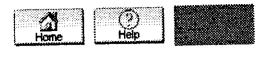
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193	Humanizing Nursing Education : A Confluent Approach Through Group Process	Request	1981 BOOK
Save	King, Virginia G Wakefield, Mass.: Nursing Resources, c1981 ix, 206 p.; 25 cm	Full Record	
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194	Study Guide Van Leuven, Karen	Request	1995 800K
Save	Redwood City, Calif.: Addison-Wesley, c1995 348 p.: ill.; 28 cm	Full Pull	
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195	Toward A Caring Curriculum : A New Pedagogy For Nursing	Request	1989 800K
Save	New York, NY: National League for Nursing, c1989 xix, 396 p.: ill., charts; 23 cm	Full Record	
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196	Reaching Out : Associate Degree Nursing Programs At Work	Request	1995 BOOK
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viii, 70 p.: iil.; 23 cm

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New York, NY: National League for Nursing, c1990

xv, 297 p. : ill. ; 23 cm Save



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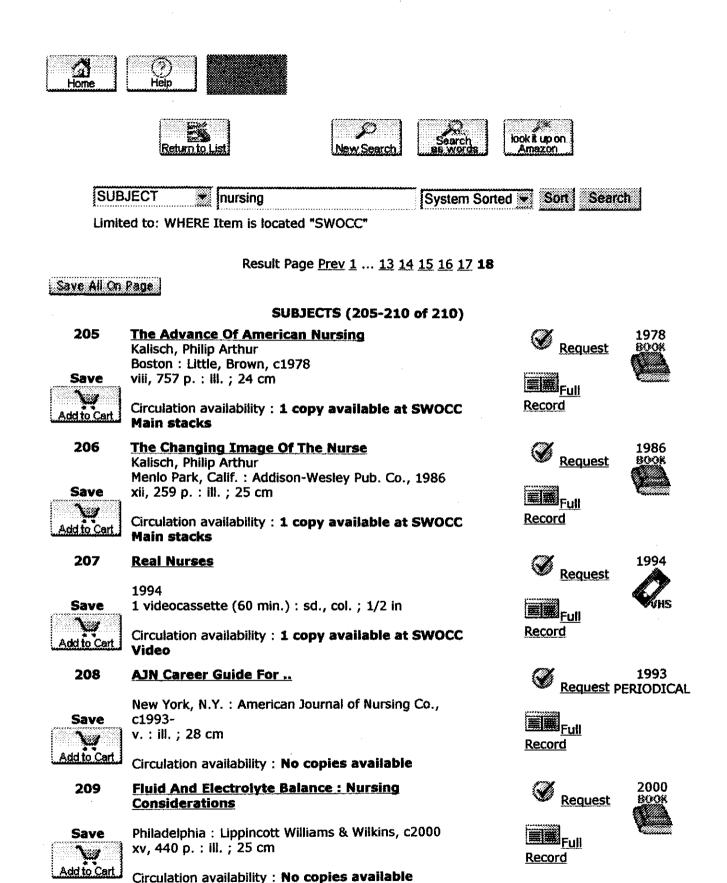


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198	Curriculum Revolution : Community Building	eme.	
130	And Activism	Request	1991 BOOK
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19 9	Expertise In Nursing Practice : Caring, Clinical Judgment, And Ethics	Request	1996
_	Benner, Patricia E	** <u>Request</u>	ВООК
Save	New York, NY: Springer Pub. Co., c1996 xviii, 410 p.; 24 cm	Full	
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-	Circulation availability: 1 copy available at SWOCC Main stacks		
200	Living A Caring-Based Program	Request	1994 8008
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100		圖圖 _{Full}	4
Add to Cart	Circulation availability: No copies available	Record	
201	Returning To School: A Guide For Nurses	Request	1983 800%
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202	The Surgical Wound		1995
	Caruthers, Bob Englewood, Colo. : Association of Surgical	Request	BOOK
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203	Endocrine Disorders	Request	1996 800K
_	Philadelphia: Saunders, c1996	Request	
Save	vii, p. 689-886 : iil. ; 24 cm	Full	
Add to Cart	Circulation availability : 1 copy available at SWOCC Main stacks	Record	
204	Nursing In Today's World : Challenges, Issues,	 Request	1995
	And Trends Ellis, Janice Rider	- <u>Kequest</u>	ВООК
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Wound Care Management

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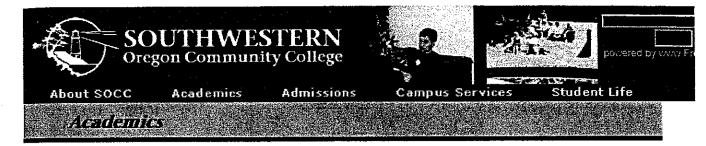








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JAMA: Journal of the American Medical Association JEMS: A Journal of Emergency Medical Services Journal of Abnormal Psychology Journal of Adolescent & Adult Literacy

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Young Children

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Robbie Kirsch

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	MEDICINE		
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n/20:033 1909	CAN'T ACCIDE TO GROW OLD	Describes the problems faced by the alderly in obtaining & paying for nursing and health care.	59 min.
KA413.7.A4 C30 1989V		Designed to increase awareness of HIV/AIDS relative to a heterosexual population.	31 min.
RA644.AZ5 J64 1993	I HE CURINGUES	Consequence consequences in benchmarking uses of dismassive and professive circlein.	20 min
RA644.A25 U5 1989	UNIVERSAL PRECAUTIONS	SILESS STORY OF THE PROPERTY O	EG min
RAB45.5.E43 1991	GERIATRIC EMERGENCIES	A training tecture with role playing, questions and examinations.	
DARAFEDS	PATIENT ASSESSMENT	Concepts in Emergency Cere	78 min.
100 t 100 t 100 t		Leadership on the scene is the focus. Concepts in Emergency Care.	15 min.
RAG45.5.534 1991	2000 AND BEYOND: Confronting the Microbe Menace	pt.1: Microbe Hunters: Tracking Infectious Agents (decumentary "Micro vs. Macro" follows the lecture 29 min.)	60 min.
חאססטיים וססס אוי			
DASSO C7 1000 at 9	2000 AND REVOND: Confronting the Microbe Menace	pt.2: The Microbes Strike Back	60 min.
nAccount 1999 pt.z	2000 AND DEVOLD Confronting the Minrobe Monaco	n. 3. Outwirting Bacteria's Wilv Ways	60 min.
RA650.67 1999 pt.3	ZEUU AND BETURD. CUIRING THE MILLIUSE INCHOLS	e A. Emercian Infortine House Aries	60 min.
RA650.G7 1999 pt.4	2000 AND BEYOND: Confronting the Microba Menaca	tree Tried Bull Bulletine The Common	15 min.
RA995.A6 D7 1990	DRIVING THE AMBULANCE	Concepts in Emergency care	17 min
RA997.A3 T4	TIME TO CARE: The Nursing Hame Clinical	The aging population & neath care outside the nospital are instrussed.	120 min
RB127,C455 1995	CHRONIC NEUROPATHIC PAIN SYNDROMES	Teleconference June 22, 1895.	
RC49.C674 H3 1987	THE HEALING FORCE	Explores the beneficial effects of diet, exercise, humer, and a patient's sense of control over his treatment & body.	/0 IIIII:
			120 min
RC86.7 A56 1988	AMERICAN RED CROSS STANDARD FIRST AID	Teaches fifeseving skills to apply in emergency situations.	120 Hilli:
RC88.7.83 1979	BASIC SKELETAL ANATOMY	Emergency Care Video Cassette Series; v. 10	33 MH.
0.08 7.04 1088	CHOKING PMERGENCY		
RC86.7.C7 1986	THE CPR LEARNING SYSTEM.	First title: (4 min.) explains the Actronics Interactive Video Learning System. Second title: (40 min.) a training film to describe	44 min.
		and demonstrate changes in CPR procedure that were adopted in 1985.	
4 - 0000	EMEDICAL CADE: Dart 1	Demonstrates how to make the initial survey, establishing an airway, perform rescue breathing, identify cardiac arrest, CPR, &	38 min.
MC86.7.E4 1993 pt. 1	באונטמבואסן אורסוסאר סאורין מני	controlling bleeding.	
6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	CALEBORENTY MEDITAL CARE: Port 2	Demonstrates how to pravent & treat shock & protect cnaself from blood borne pathogens. Treating burns, fractures,	44 min.
HC66.7.E4 1983 pt.2		poisoning, & drug overdase.	
0000		Concents in Emercency Care	12 min.
RC86.7.E43 1990	EMERICENS CHILDRALLI	Emeraneus Gran Uiden Paecette Sarios: v 12	19 min.
RC86.7.F8 1979	FRACTURES AND DISLUCATIONS I: The Upper extremity	Childigalof adia made passatra bands, m. t.	15 min.
RC86.7.F82 1979	FRACTURES AND DISLOCATIONS II: The Peivis and Lower extremities	Childipanty Cale when Cassages Const.	20 min.
RC86.7.F83 1979	FRACTURES AND DISLOCATIONS III: The Spine	Emergency Care Video Cassatte Series; v. 14	
RC86.7.P8 no.1 - no.6	PRE-HOSPITAL TRAUMA CARE	no.1: Assessing the Trauma Victim no.2: Arrway, Ventilation, UXygonation, Oxynotix rino.3: Invastic ox Autominia Trauma in No.3: Head & Spine Trauma Patient Head & Spine Trauma no.5: Extremity Trauma & Burns no.6: Managing the Multi-systems Trauma Patient	
			oc nin
BC86 7 S4 1979	THE SKIN AND MUSCULAR SYSTEMS	Emergency Cara Video Cassotte Series; v.9	
RC86 7 68 2000 v.1 · v.10	PL YOU ARE THE EMT		25 min. ea.
GC67 0 241 nn 1		no.): Introduction	. HE
0.00 1 DA 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	BASIC LIFE SUPPORT	no.2:One rescuer CPR-adult	12 min.
5.00 1.00 0 L000	RASIC LIFE SUPPRINT	no.3:Foreign body in airway construction	12 min.
0.01 19.07 0 20.0	RASIC LIFE SUPPORT	no.4.Pediatric CPR and foreign body airway construction	18 min.
7007.3.041 110.4	BASIC LIFE SUPPORT	no.5:Special techniques	6 min.
RC87.9.841 na.5		ne.8.Safety in CPR	7 min.
RC8/.9.64 No.5 octon 88 58 1008	'HROUGH MOVEMENT & DANCE: For	the Breast Cancer Using the "Lebed Method" of exercises to help regain full range of motion, reduce risk of lymphedems, and improve self image.	49 min.
	Survivor		
RC348 133 1989	IDENTIFYING NEUROLOGIC DEFICITS	Demonstrates neuroassessment skills performed by nurses.	SO IRIII.
RC454.W67 no.1	THE WORLD OF ABNORMAL PSYCHOLOGY	no.1: Looking at Abnarmal Bahavior	00 min.

2/9/2004 3

60 min.	30 min. 33 min. 120 min. 49 min.	48 min. 105 min. 30 min.	110 min. 115 min.	90 min. 85 min	90 min. 120 min.	90 min.	30 min.	38 min. 27 min. 30 min.	44 min.	2/9/2004 3	30 min. 14 min.	15 min. 19 min.	60 min.	30 min. 17 min. 22 min.	43 min. 19 min.	94 min.	an Ti	25 min. ea. 22 min.	30 min.	50 min.	22 min. 22 min. 22 min.	60 min. 29 min.	47 mm.	62 min. 57 min.
Health Videos no.2: The Nature of Stress no.4: Psychological Factors and Physical Illness no.6: Substance Abuse Disorders no.6: Substance Abuse Disorders no.6: Mond Disorders no.9: The Schizophrenias no.11: Behavior Disorders of Children no.12: Psychotherapies no.13: An Ounce of Preventian Helps viewer to understand addictive relationships and how te begin the recovery process towards making healthy relationships.	Essential information for individuals and couples working on building healthy relationships. Description of a normal relationship and what steps are needed to achieve one An introduction of cognitive-behavior therapy. An initial therapy session and discussion. Designed to teach students and mental health professionals about the basic concepts and techniques of rational emotive behavior therapy (REBT).	In this session, the therapist works with an emotional, talkative men whose presenting problem is explosive anger. Explains the basics of REBT for use with children and edolescents. Or. Albert Elis discusses his theory of retional emotive therapy with students.	An intreduction of reality theory, followed by an initial therapy session, then a discussion. Begins with a discussion about the theory and its application, followed by an actual counseling demonstration.	Updates the latest management of patients at different stages. Provides an identification & possible prevention of Alzheimer's. Distinguishes between symptons of normal aging & disease.	for those with Alzheimer's disease or other r	ntol, genetic, and	Suzuki examines the manifestations of mental depression and a variety of medical and psychotherapeutic approaches to its management	The therapist works with a very depressed client who experiences some suicidal thoughts. Who and what makes someone a psychopeth and how are the classified medically? Explains how chemical act on the brain's eleasure centers. Helps viewers understand compulsive behavior & points toward	k addictive habits. rmation on how the immune systom works, and explains why some treatment work and other		Health Videos Presents a graphic demonstration of normal fluid and electrolyte physiology. It examines the deinstitutionalized treatment of the mentally ill patients in the city of Geel in Belgium.	Shows that if you keep your blood sugar level as near normal as possible you can reduce long-term complications. Describes the often subtla symptoms of heart disease and what to do when one experiences such signals. Explains the risk	'actors. Presents jatost findings about heart disease, warning symptoms, and ways to prevent heart attacks.	is to identify the common causes of chest pain. for beginning geriatric care givers.	Documentary on the lives of three pregnant drug addicts. Examinas the cause & effect of fetal alcohol syndrome. Shows how alcohol and other drugs can injure a fetus.	are of newborn infants for first time paren letamerphosis of a child from a toddler to p food and shelter, veccines are probably the	ensive, easy to understand, and based on the best scientific evidence	an and home delivery s	Discusses preparations & techniques for administering IV therapy, assessing problems & proper intervention when problems	occu Orientation for prospective students of the newly formed pharmacy technicien program at Southwastern Oregon Community College.	no.3:Making an Occupied Bed no.6:Bathing, Part 1	. Portrays the t all health ce of growth an	The viewer is led through "centering" and other practice exercises for developing sensitivity.	Key lectures in EMS Shows the grueling training and preparatioon firefighters go through.
THE WORLD OF ABNORMAL PSYCHOLOGY	ADDICTIVE RELATIONSHIPS: Relationship Styles ADDICTIVE RELATIONSHIPS: Relationship Building Cognitive: Behavior Therapy With dr. John Krumboltz Coping With Anger	OVERCOMING LOW FRUSTRATION TOLERANCE: 43-Year-Old Male With Anger Problems That Are Interfering With Close Relationships and Effective Health Management. Therepist: Janet L. Wolfe RATIONAL-EMOTIVE THERAPY: With Children and Adolescents CONVERSATIONS WITH ALBERT ELLIS: Introductory CONVERSATIONS WITH ALBERT ELLIS: Intermediate Level	REALITY THERAPY Solution focused Therapy	ALZHEIMER'S DISEASE: A Scientific And Clinical Update	ALZHEIMER S. FOT: THE BESIES FOR CAREGIVING ALZHEIMER'S DISEASE: Hope For The Future. I FGAL AND FINANCIAL CONSIDERATIONS FOR FAMILIES AFFECTED BY	ALZHEIMER'S DISEASE AND OTHER RELATED DISORDERS. Toloconforence CLINICAL PERSPECTIVES FOR PANIC DISORDER IN THE NINETIES	DEPRESSION, BEATING THE BLUES	OVERCOMING DEPRESSION: 34-Year-Old Male With Depression and Low Self Acceptance. Therapist: DiMattia THE PSYCHOPATHIC MIND CORPATING YOUR CRAVINGS	THE HUMAN IMMUNE SYSTEM: The Fighting Edge		ASSESSING FLUIDS AND ELECTROLYTES An MINITES ALI IN THE FAMILY	PEOPLE WITH DIABETES CAN ENJOY HEALTHIER LIVES!	HEATT DISEASE	HOW TO PREVENT A HEART ATTACK ASSESSING CHEST PAINS A MIDGET IVE MARY	A NUNSE LINE MANN UNDESTANDING YOUR BONE MARROW TRANSPLANT: A VIdeo For Patients SHE'S PREGNANT AND SHE'S A JUNKIE EETALALOHIII SYNDROMF	LAMAZE: 10 Mejor Pere su Bebe Human Development: 2 ½ to 8 Years Vaccines and Your Baby	VACCINES: Separating Fact From Fear	AVDIDING MEDICATIONS ERRORS MEDICATIONS: ADMINISTRATION & ABSORPTION EQUIPMENT AND OXYGEN THERAPY	DETECTING AND MANAGING I. V. THERAPY PROBLEMS	PHARMACY TECH ORIENTATION	BASIC PATIENT CARE: Comfort and Hygiana BASIC PATIENT CARE: Comfort and Hygiana	BASIC PATIENT CARE: Comfort and Hygiene REAL NURSES AGE-SPECIFIC COMPETENCIES	THERAPEUTIC TOUCH: Healing Through Human Energy Fields	TECHNOLOGY HAZARDOUS MATERIALS AND EMS RESPONSE TEST OF COURAGE: The Making of a Firefighter
RC454.W67 no.2 RC454.W67 no.3 RC454.W67 no.4 RC454.W67 no.5 RC454.W67 no.9 RC454.W67 no.9 RC454.W67 no.10 RC454.W67 no.11 RC454.W67 no.12 RC454.W67 no.12 RC454.W67 no.13	RC489.B4 A3 1989 no.2 RC489.B4 A3 1989 no.3 RC489.C63 C6 1998 RC489.R3 C66 1993	RC489.R3 09 1993 RC489.R3 R37 1993 RC489.R31 C582 1981 RC489.R31 C583 1981	RC489.R37 R4 1998 RC489.S65 S643 1998	RC523.A49 1991	HC323.439 1989 RC523.459 1992 RC523.133 1994	RC535	RC537.D3 1983	RC537.09.1993 RC555.P79 1996	RC581.H8 1990		RC630.M3 1989x	RC439.5.455 2002 RC660.P46	RC672.H4 1987	RC685.16 H69 1990 RC941.A87 1989	RC954,N891 1991 RD121,U7 1993 RG580,D76 S5 1992	RJ101.L43 2000 RJ131.H85 1992 no.1 - no.3 RJ240.V3 2002	RJ240.V29 2001	RM145.A9 1889x RM147.M42 1980 no.1 - no.4 RM161	RM170.D4 1988×	RS111.07 P46 1992	R141.837 1978 no.3 R141.837 1978 no.6	RT41.B37 1978 no.7 RT82.R3 1994 RT85.5.A33 1988	R2401.T4 1992	丁 T55.3.H3 H38 1990 TH9151,T42 1999

Southwestern Oregon Community College Public Safety Training and Education Department

EMT Training Videos

6101	The History of Modern EMS
6103	Emergency Medical Care, Part I
6104	Emergency Medical Care, Part 2
6201	The Silent Attack
6203	EMT: Injury Free
6205	Blood borne Pathogens
6207	Blood borne Pathogens
6301	EMS Safety Series: First Aid & CPR Instructor Certification
6303	Keep it to yourself: Patient Confidentiality
6305	Child Abuse - Recognition, Response & Reporting
6306	Child Abuse - Recognition, Response & Reporting
6401	HARE Traction Splint
6403	HARE Folding Scoop Stretcher
6405	SAGER Traction Splints
6407	CPR-2300 MegaCode Kelly CPR-7500 MegaCode Kid
6502	Emergency Pediatrics Care for EMT, Workshop 2
CEO2	Emergency Pediatrics Care Workshop 3

6507 Intra osseous Infusion

6605 EMT Core Communication and Documentation

6607 Patient Assessment

6609 Medication & Pharmacology

6701 Vital Signs: Blood Pressure

6702 Chest Pain

6703 Heart Sounds

Appendix M

quipment needs 2004	Quanity					
em	2005	2006	2007	2008	2009	
ŒD	1	1	1	1		
MAST / PASG	1	1				
Backboards				2	1	
Spider Straps		5				
raction Splint (combo)	1			1	!	lare to MP
C-collars No-neck, short, reg, tall (ea)			5			····
C-collars Ped, infant (ea)			2			
BP Cuffs			5		5	
Stethascopes	1 - 1-	5		5		
ifepak 500 Trainer		1				MP
Scoop Stretchers	1				1	
V arm Full	 		1			
Replacement skins/ veins	 	2				
Replacement skins/ veits Gomco-Optivac Suction	+			1		MP
	2	2				
3VM Adult	 	2	2			
BVM Child	 		2	2		
BVM Infants				<u>-</u>	1	
Airway mannequin	+			1	·	
Airway mannequin (ped)			1			MP
I/O trainer	_		3			·
Combi-tube trainer		3	-			····
OPA sets		3				
NPA sets		3			5	
Trauma shears	5		1	1		
Glucometer			!	5		
Glucometer Elite test strips (boxes)	5			5		<u> </u>
Lancets (boxes)	5		2			
Sharps Containers			3			
Nasal cannulas		50		50	-	<u></u>
Non-rebreather masks				50	50	
IV catheters 20g	50		50	50	- 30	
IV fluid 250ml N.S (cases)			1		<u></u>	
Drip sets		20				
EKG electrodes (bulk pkg)			10			
2x2 (boxes)		5		5		
4x4		5		5		
2" Tape			5		5	
1" Tape			5			
Gloves (cases)						
Large	2				2	-
Medium		1	L	1		
Small			1			ļ
OTTOR						
Penlights		10		10		

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Appendix N

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Southwestern Oregon Community College

EMERGENCY MEDICAL TECHNICIAN PROGRAM

For office use: Placement Scores (For EMT Basic)	Read	Write	Math
Accept	yes/no		

EMT-Basic (8-1-2)

BASIC

COURSE ENROLLMENT APPLICATION AND PREREQUISITE VERIFICATION FORM

This course application and verification form must be completed in its entirety and copies of documentation must be attached before a student can enroll in an EMT course. Students may not attend classes without completing registration for courses in advance. Questions about this application should be directed to Paul Reynolds (888-7296) or Robbie Kirch (888-7432).

Course Information					
Course Beginning Term	(check one):	Fall _	Winter	Spring	// Year
Location of Course:	Southwest	em Othe	er Site:		
Personal Information		D	rivers License N	0	State
Name			Soc. Sec. No)	
Address					
City					
Are you enrolled in the	one year EMT cert	ificate prog	ram at SWOCC	?Ye	sNo
Do you work with an ag	ency providing emo	ergency me	edical services?	Ye	sNo
Agency Affiliation	Trair	ning Officer		Phone	
Address					
Applicant's Agency Oregon law requires that student insurance in the amount of not le from your agency must verify the	s participating in cl ss than \$1,000,000	inical/ambu per occurre	lance experience	s be covere	ed by professional liabilit
Agency Insurance Provider	÷.	Phone No			
Address	Policy No				
l certify that the individual named identified in the amount indicated		is covered	by professional li	ability insul	rance through the agend
Signature of Agency's Au	Ithorized Repres	entative		ate	

EMT-Basic Course Prerequisites

Students pursuing the EMT Certificate Program and/or EMT-Basic course must satisfy the following prerequisites prior to registering in courses. Certificate Program students should consult with their advisor.

- 1) 18 years of age minimum
- 2) high school diploma or GED
- 3) documentation of immunizations (see section E below)
- 4) urinalysis required before clinical / field study time (arrangments made by college)
- 5) Southwestern placement exam results demonstrating skill level to (see note below):

Math 70

Reading 101

Writing 121

(minimum score of 48)

(minimum score of 47)

(minimum score of 43)

NOTE: The Southwestern placement test is used for advising purposes. Students scoring below the minimum levels listed will be referred to the EMT Program Coordinator for approval to register for EMT-B. Students scoring lower than the levels indicated should consider enrolling in courses that will build their skills and improve their chances of succeeding in the EMT-Basic course.

Documentation of Immunizations

Entrance into EMT courses is restricted to individuals who have the immunizations as required by Oregon Administrative Rules. The immunizations are required to work in health occupations. You must attach a signed immunization record and/or titers indicating immunization for the following:

Measles (MMR) Hepatitis B

Chicken Pox

Diphtheria Tetanus (DPT) series

Oral Polio (OPV)

Tuberculosis: A negative PPD within two months of starting clinical is mandatory

All records must be signed, dated, have the letterhead of the clinic and be legible.

Waivers and Acknowledgements

Read each of the following statements and through your signature verify that you understand and accept that which is stated.

INVASIVE PROCEDURE

I understand that as an EMT student at Southwestern Oregon Community College I will be performing invasive procedures and may have invasive procedures performed on me by fellow students under the supervision of the instructor. I am aware of, understand, and fully accept any of the physiological and psychological risks involved in this procedure.

Signature of Applicant	
Signature of Applicant	Date
•	_

OREGON HEALTH DIVISION EMT CERTIFICATION

The Oregon Health Division requires applicants for certification to complete an extensive personal history form addressing the applicants physical, mental, and emotional health. I understand that Southwestern Oregon Community College cannot guarantee that I will become certified as an EMT and that certification is a matter between me and the state.

Signature of Applicant	/
and managed at a special state	Date

CERTIFICATION OF APPLICATION

I have read and understand the admission requirements for enrollment in the EMT Certificate Program and EMT courses at Southwestern Oregon Community College. I certify that the information contained in this application, or attached to it, is correct and that any deficiencies will be remedied. I understand that failure to remedy a deficiency within a reasonable period of time will result in my being withdrawn from the EMT program or course.

Signature of Applicant	/ Date
= **	

Appen	dix	0
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Southwestern
Oregon
Community
College

Public Safety Training and Education

EMERGENCY MEDICAL TECHNICIAN CERTIFICATE PROGRAM

STUDENT HANDBOOK 2003 - 2004

(541) 888-7432

Emergency Medical Technology Program

Student Handbook

Welcome To Students

Welcome to Southwestern Oregon Community College and the Emergency Medical Technician (EMT) Program. You are enrolling in an innovative program, statewide in scope, that has become a model for emergency medical technician programs beyond Oregon's borders. We hope you will find your experience in the EMT Program rewarding and that you will further your professional studies by earning a two-year degree in paramedic technology once you complete your EMT Certificate Program at the college.

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The Mission of The Emergency Medical Technician Program

The Emergency Medical Technician Program at Southwestern Oregon Community College exists to:

- prepare students for career opportunities in the field of emergency medical technology;
- to provide volunteers and professionals in the emergency medical technology field with the opportunity to obtain the training they need to effectively serve the communities in which they reside.

Southwestern Oregon Community College is a participating institution in Oregon's statewide program leading to the Associate of Applied Science Degree in Paramedic Technology. The program is an innovative program in which community colleges have joined together to make a degree in paramedic technology accessible to students throughout Oregon. Upon completing the one-year certificate program at Southwestern Oregon Community College, a student can transfer to one of the community colleges offering paramedic level training and complete their associate degree within one additional year.

The historical role of the college in emergency medical services has been in training area emergency medical technicians to staff paid and volunteer positions in area emergency services agencies. This tradition continues today alongside the delivery of the one-year certificate program. In providing training to support area agencies, the Emergency Medical Technician Program administers First Responder classes, EMT-Basic and EMT-Intermediate classes, and special training opportunities throughout the region.

2

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Purpose of the Handbook

The purpose of the EMT Program Handbook is to provide information of interest to EMT students. The information will assist students to maximize their educational experience while enrolled in the EMT Program. As an EMT student, you should familiarize yourself with the materials included in the Handbook. In addition, read the Southwestern Oregon Community College Catalog. The catalog provides information to students including policies, procedures, and rules of the institution.

Program Coordination

The EMT Program is administered by the Coordinator of Public Safety Training and Education Department at the College. The coordinator provides leadership to the program and serves as a primary resource for students. Questions and concerns students have about the program or about their experiences should be directed to:

Paul Reynolds, Coordinator
Public Safety Training and Education Department
(Fire Science, Criminal Justice and EMS Programs)
Southwestern Oregon Community College
1988 Newmark Avenue
Coos Bay, OR 97420

Office: Fire Science Building Phone: (541) 888-7296 Email: preynolds@socc.edu

Program Secretary: Robbie Kirch Phone: (541) 888-7432 Email: rkirch@socc.edu

Admission to the Program

Admission to the EMT Program is open to all students who can profit from instruction provided. Students should register for courses early in order to avoid the possibility that a class will close. The EMT-Basic class, in particular, is prone to fill early and close.

Special Enrollment Applications for EMT-Basic / Intermediate Course

The EMT-Basic course, a core course required in the EMT Program, and the EMT-Intermediate course, have special provisions that must be satisfied in order to enroll in these classes. EMT Enrollment Application and Prerequisite Verification Form must be completed by all students intending to enroll in EMT-

Basic and EMT-Intermediate courses prior to registering. Copies of these special applications are available at the admissions office or may be obtained from the Program Secretary.

Certification as an EMT

Southwestern Oregon Community College cannot guarantee that you will become certified as an EMT at a specified level. In order to become certified, you must satisfy Department of Human Services requirements and successfully complete state administered practical and written exams. The role of the college is to provide training specific to the level of certification sought. Certification, however, is a matter between a student and the DHS - Health Services EMS and Trauma Systems.

Required Background Information for Certification

The Oregon Emergency Medical Serivices application to become an EMT requires that you provide considerable personal history related to your criminal past, drug use, and physical and mental health problems that could affect your ability to perform as an EMT. If you are concerned about this talk to the EMT Program Coordinator. By all means, don't lie on your application; instead, answer questions honestly. Evidence of dishonesty is certain to disqualify you for certification.

Clinical and Ambulance Experience

As part of the EMT-Basic course, students participate in on-site learning experiences in hospitals and with ambulance services. These experiences are recorded on check-off sheets, examples of which are provided on pages -37- and -38- of this Handbook. Achieving objectives for clinical and ambulance experience is considered an important component of the EMT-Basic. The experiences afford students an opportunity to obtain real-world experiences in emergency medical services.

It is the responsibility of course instructors to arrange student schedules for practical experience with staff of area hospitals and ambulance services. Once a student's schedule is established, they should attend the location scheduled on time and present themselves professionally. Each student represents the EMT Program at the college as well as an agency for which they may be working. In light of this, students cannot be reminded to many times of the importance of professional behavior and personal appearance when working in clinical and ambulance environments.

Unprofessional behavior and appearance is justification to remove students from assigned sites at the discretion of a clinical or ambulance site coordinator, the instructor of the EMT-Basic course, or other health professional in authority. Removal of a student from a site may result in their failing to complete requirements for the EMT-Basic course.

Professional Behavior and Attire

All students participating in clinical and ambulance experience are expected to behave and present themselves in a professional manner. Behavior exhibited that indicates drug or alcohol use, inability to perform required skills, poor judgment, unsafe behavior, or failure to conform to standards of medical custom and courtesy will be deemed to provide justification for disciplinary action of the student consistent with college policy.

Appearance

All students must consider the importance of personal cleanliness and professional appearance when working in clinical and ambulance settings. It is recommended that students tend to their personal hygiene prior to arriving at an assigned site and dress in professional looking clothing. Denim should be avoided.

Confidentiality

When working in clinical and ambulance settings, any information a student learns about a patient is confidential. This means that a student may not share information about patients except with health care staff and legal authorities. Violating confidentiality is a serious act and will result in disciplinary action against the student in accordance with established policy.

Working with the Medical Community

As a student in the EMT Program, you must recognize the critical role that courtesy and respect play in the medical community. You must also respect the role and responsibility of physicians in the care of patients. It is expected that you will uphold the standards of courtesy and respect when working with other professionals in emergency services areas and you will closely follow health facility and ambulance protocols. Consider that derogatory, disruptive, harassing and critical behavior by students will not be tolerated and will be dealt with in accordance with established policy at the college.

Field Experience Opportunity

The EMT Program offers students the opportunity to earn additional college credits and field experience hours by working additional hours, beyond those specifically required in courses, in emergency services settings. Students who are interested in these opportunities should contact the Coordinator of the EMT Program for more information.

6

Placement Tests

Placement tests are administered to students applying for admission to Southwestern Oregon Community College by the Ecucational Support Programs and Services located in Stensland Hall. The purpose of placement testing is to assist program advisors in placing students in courses most appropriate to their needs and to insure their ultimate success in classes. Tests measure basic academic skills and will not be used to keep a student from enrolling in the EMT Certificate Program. Placement tests are also requested from students affiliated with EMS agencies prior to their enrolling in an EMT-Basic course. The results of the placement tests are used to assist agency affiliated students to determine appropriate strategies useful for their own success and will not prevent them from enrolling in an EMT-Basic class.

Assignment of Program Advisor

Upon submitting their application to attend Southwestern Oregon Community College, students will identify their intent to major in the EMT Program. An academic advisor will be assigned to assist students in selecting courses and in planning career-related objectives. Students who originally are undecided and who later declare EMT as their major will need to file a change of major form with Educational Support Programs and Services and request an advisor in the EMT Program area. Students may change their advisor at any time by submitting a request for a new advisor through Educational Support Programs and Services.

Class Schedules

Prior to each term a schedule of available classes is published and distributed throughout the college district and to students on campus. The class schedule contains important information related to registering for classes. Students should familiarize themselves with the class schedule prior to scheduling an appointment with their advisor to discuss registering for courses in any term.

Student Responsibilities

All students have the responsibility to familiarize themselves with the College Catalog, the contents of this Handbook, student rules and regulations established by the college, and the syllabi of courses in which they enroll. Students are expected to be aware of specific requirements established by instructors for each course in which they enroll. Instructors will identify assignments, along with testing and grading requirements, in a course syllabus that they prepare for each course and distribute to students.

Many courses required in the EMT Program have prerequisites that must be satisfied before students can register for the course. For instance, a student cannot enroll in Anatomy and

Physiology without one year of high school chemistry or equivalent taken within the last five years. In addition, many of the course sequences required to complete the EMT Program must be taken in a certain order. Consulting advisors prior to registering for classes will help students avoid possible conflicts in planning class schedules each term.

The faculty in the EMT Program expect students to maintain high ethical standards. Academic dishonesty will not be tolerated. Plagiarizing materials in order to complete assignments, cheating on examinations, abusive conduct directed to staff or other students, and other conduct in violation of established rules and policies of the college will be dealt with in accordance with the disciplinary policy of the institution.

Library Facilities

The library is considered an indispensable resource to EMT students (on or off campus). New books related to the emergency medical field are purchased each year and several magazines and professional journals related to emergency medical services are available for use by students. The faculty in the EMT Program expect students to become familiar with the library and its up-to-date services since class assignments may include research projects that will require library familiarity. A library user's guide is included in this Handbook to introduce you to available services.

Learning Hub and Computer Resources

The fourth floor of the Tioga building is available to all students (on or off campus) for computer access for individual needs. All computers on this floor have internet access.

Testing Lab

Occasionally as a student you must miss a quiz or test. Southwestern offers a testing lab that allows a student to make up the test without causing the instructor or the student unnecessary inconvenience in coordinating a time to re-test. To find out current hours, contact ext. 7325.

Student Portfolios

EMT students are encouraged to organize and maintain a portfolio of the work they produce while enrolled as an EMT student at the college. Portfolios will have value when students graduate and begin looking for employment. Portfolios can be used by students to present themselves and their work product to potential employers. Care should be devoted to compiling portfolios. Information included will vary from student-to-student but can include samples of papers and projects completed, evaluations offered by faculty, a resume, transcripts and other materials. Students who intend to transfer to community colleges offering paramedic level training are strongly encouraged to maintain portfolios of their work. This may enable them to complete the transfer process to another program more conveniently.

8

Article adopted from The Successful EMS Job Campaign (Jems, Career Supplement Vol. 19, No. 8, August 1994, pp. 60,61,63,64,65,68)

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The Successful EMS Job Campaign

By John M. Becknell, EMT-P

This article is an excerpt from John M. Becknell's forthcoming Jems book on creating success in EMS.

INDING A JOB you really want can be stressful and frustrating. In fact, going out and selling yourself to strangers and facing possible rejection ranks right up there with losing at poker and getting kicked in the shins. The whole process is ambiguous and full of game-playing. Consequently, many people approach the job search using the least painful method-instead of pursuing the job they really want, they employ a passive approach of asking around, checking the classifieds, and mailing off a few résumés and applications. As a result, most of their time is spent waiting, never really feeling in control of their destiny.



Along with the excitement of 9-1-1 trauma calls, a large part of EMS is providing the patient with care and comfort.

But job hunting doesn't have to be a black hole. While it may never be easy, you can take control. You can find a job you want and decrease the stress and mystery of the process by conducting an organized, systematic job campaign.

Considering Opportunities in EMS

Before working on the job campaign, let's talk about opportunities in EMS. People often have the mistaken notion that EMS is saturated with workers and limited in opportunity. But in reality, EMS is just beginning to open up. While the profession barely existed and opportunities were slim 20 years ago, the field has re-

cently exploded; each year, EMS continues to grow and diversify.

Although working in EMS has traditionally meant working on a rescue squad or ambulance, there are now many more places—and ways—to apply your skills. There are endless opportunities in education, management, research, pub-

lishing, communications, support services and sales. Your opportunities in this field are limited only by your vision.

Clarifying the

What sort of job are you looking for in EMS? Instead of looking at the market around you and settling for what's there, you need to have a vision of what the job you really want looks like.

Consider what your purpose is in this profession. What are you really looking for? Where do you ultimately want to go in this field? After a little reflection, sit down with a pen and paper and describe that job in detail.

Once you have an idea of what the job you want looks like, you'll need to determine if you meet the qualifications for the position. This process involves gathering data.

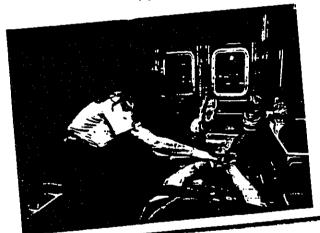
The best way to gather reliable data on qualifications is to consult at least five different sources. This may sound like a lot of work, but the more reliable the information, the better your chances of getting the job you want. Talk with people who are actually doing the job you want. Do a search of the professional journals for additional information about qualifications, and contact organizations that have positions similar to the one you're interested in.

Let's say you are interested in becoming a helicopter flight paramedic. Place a call

to a flight service, introduce yourself, and tell the person answering the phone that you're an EMS person gathering information about the qualifications of flight paramedics. Your introduction might go something like the following:

Hi. My name is _____, and I'm a paramedic exploring career possibilities in EMS. Your organization was recommended as a quality flight service, and I'm interested in learning about the qualifications of a flight paramedic. Can you connect me to someone who can answer some questions for me?

I have done this numerous times, and people are almost always willing to provide information. I've found that most EMS people enjoy talking about their work as long as you remain polite, brief and clear about what you are asking for. You may be shuffled around or be asked to call back, but eventually you will



Some EVS environments offer challenges beyond providing typical prehospital care.

find someone to talk with. If you are instructed to call back, though, ask for the name of someone specific; having a name always gets you further.

Once you've made your first call, don't stop. You may feel discouraged as you compare your current qualifications with what you've learned, but push ahead. Keep in mind that you're just gathering data, and move on to the next call until you have a pile of notes on what it takes to qualify for the job you want.

If you do need additional experience.

Ity to determine specifically what experi-

ence you need. For example, most flight services require that you have advanced life support ground experience. In this instance, then, you would want to find an ALS job with a

service that has a good reputation, is respected by the community at large and will allow you to sharpen the skills you'll need for your flight position.

One paramedic I know wanted to work for a big-city EMS service known for its high action and trauma. The problem was, the service required at least a year of ALS experience, which he didn't have at the time. But instead of giving up, he had the organization clarify what it considered experience and then moved to a suburb that had a fire department-run volunteer ALS service. For a year, he worked as a

nursing assistant in an emergency department and responded with the volunteer ALS service. It was a hard year, but he finally earned the qualifications required and got the position he wanted.

One additional note on qualifications: There may be a way to get past an experience require-

ment. If you interview well, have a good employment history and can offer something unique to the organization, you may be hired without the experience. Don't count on it, but don't be afraid to try.

Step for Your Job Search

If work were our entire life, we could move anywhere and make any sacrifice for the job we wanted. For those of us who do try to lead balanced lives, though, most would like to find our ideal jobs close to home, on our own terms and



Those middle-of-the-right tails can be tough, so be sure to determine whether you can—or are willing to—work the variety of shifts EMS typically requires.

paying the wages we need. But the position you want may in fact mean a move, more education, less money or a difficult work schedule. In deciding which job to pursue, then, you will need to balance work with the rest of your life and set parameters for your job search (see "Defining What You Want," on page 64).

Identifying Potential STEP Organizations and Jobs

Once you've spelled out the job you want and have an understanding of the parameters of your job search, you can begin looking at the market and identifying organizations you might be interested in working for.

First, get a map of the geographic area you are willing to work in. If the area is smaller than the map, draw a boundary line around the area you're willing to work in. Using telephone books, employment guides from the library and computer bulletin boards, and by calling municipal offices and hospitals, make a list of the organizations that have positions fitting your job description (regardless of whether any are currently available).

Next, using 3x5 cards, write the name of each organization at the top of a card (use one card per organization). Then begin filling each card with information about the organization. Try to answer these questions:

- Does this organization have the job I'm looking for?
- 2. How can I get hired by this organization?

These answers will come by doing some focused detective work.

Begin by gathering all the general information you can about each organization—name, address, phone number, director's name, number of employees, volume of business, etc. You can obtain most of this information by simply calling the organization, checking with the marketing department or talking with someone who works there.

Your real information, however, will come from developing a network and contacts.

A Pep Talk on Networking

Networking is the lights and siren of your job search; it opens up pathways that enable you to reach your goal. Unfortunately, however, many EMS people are turned off by the concept; they view networking as "brown nosing" and playing politics. One EMS job hunter put it this way: "Why can't I just be accepted for all the good things I do? Why can't I be hired for my skills and abilities? Sucking up to someone so I can get a job rubs me the wrong way." This view is inaccurate, though-networking isn't about seeking personal approval from others; it's about building professional relationships to share information with others.

A network is built by meeting and talking with people. And every EMS person you meet is an opportunity to build your network. Conferences, training meetings and conversations in emergency departments are all great places to start.

When you do meet people, introduce yourself. Take careful note of their names, and ask questions about them, their work and their organizations. Try not to talk about yourself; most people enjoy being asked about themselves and their work much more than they enjoy being told about you or yours. Also, don't mention that you're looking for a job unless someone asks. People may be turned off if they think you simply want to use them in your job search. Be honest, however—tell people you're gathering information about different EMS organizations and careers.

Act confident and relaxed; don't act desperate, hungry or worried. Be a good listener, and don't be afraid to ask people if they know someone else you should talk to. Finally, ask if you can use their names when contacting people they've told you about.

As you begin to make contacts, you will develop your own way of approaching people. Remember that you're just asking for information—you're not trying to sell a vacuum cleaner. If someone brushes you off or treats you rudely, shrug it off (unfortunately, there are some arrogant, insecure people in EMS, just like in every other field).

A Narrowing

Once you've gathered data on the organizations within your job search area, you'll have a good idea of which ones you want to pursue. Go through your 3x5 cards and weed out the organizations you don't want to work for (don't weed out the ones you might want to work for but doubt you'll be hired). Now focus on these organizations.

To figure out the mystery of how to get hired, you'll need a contact within or close to each organization. This contact need not be a management person, and in fact, you may get more information from a nonmanagement person. You can let your contact know you're conducting a job campaign, but don't come off as desperate. Present yourself as enthusiastic about working for his or her organization, but also be patient.

Develop relationships with your sources, and then build your relationships

by investing in them. Show an interyour contacts as people. Take them for coffee. See if you can do a rideal or develop the relationship in some of nonintrusive manner.

As you work with your contacts, gather data about the following: How did past few people get hired, and was a something distinguishing about the What can you do to prepare yourself a position? Is there currently an open How often does the company hire? I planning an expansion in the future What specifically does the managem look for in a new employee? While a may never ask your contact these quations directly, as you learn more about the organization, you will uncover the a swers.

Several years ago, I was working with graduating paramedic class during a ting when the job market was extremely tig. Every door seemed closed. Many of its students stopped working their network and either left town or found work outside of EMS. However, one young mastayed at his job and worked his network making polite contacts, calling old one and staying on top of things. But nothing seemed to be open.

One day, he called a contact at a missized hospital ALS service and asked hospital service and asked hospital service had three paramedics out due to injuries and that it needed someone right away on a temporary basis. To make a long story short, the paramedic was hire for a temporary on-call position. Within month, the position led to part-time

Networking Rules

- Don't wear out a contact; always end a conversation before it becomes laborious.
- If a conversation goes well, ask if you may contact that person in the future. If so, write down his or her name and phone number.
- 3. Always thank a contact for his or her help. Following a short conversation, a spoken thank you is fine, but if someone talks with you
- for an extended period of time, send a thank you card.
- 4. Keep track of all your contacts on 3x5 cards. Record the person's name, title, organization, address, phone, what your conversation was about and the date of your contact. You may need this person in the future and will want to remember exactly what you talked about and when.

work, and in less than six months, the paramedic had a full-time position. The position was never advertised; this paramedic was hired only because he exercised his network.

Another student took a job working for a nonemergency service doing wheelchair transfers. He used the position to develop contacts with ALS people everywhere he went. Before long, he became well-known as a friendly, helpful person. He looked for opportunities to chat with people, and occasionally he would stop by a station to deliver equipment he had found in emergency departments. When the county service began its formal hiring process nine months later, he came with such high recommendations that he was hired over a large group of more experienced people.

5 Presenting STEP Yourself

Once you're ready to apply for a specific position, you will need to present yourself through letters, applications, résumés and interviews.

Presenting yourself in the best possible light requires confidence in your qualifications and an intimate familiarity with what you have to offer. And the best way to present yourself is by building an accomplishment-oriented résumé. Constructing an accomplishment-oriented résumé can be a confidence-building process that will help you identify exactly how much you've done and how qualified you really are.

Make a list of your accomplishments both in and out of the workplace, going back to high school if needed. List things that relate to EMS, but don't overlook those in other areas. Have you organized something, taught a class, led a group or researched a topic? What were your accomplishments in the jobs you've had? Did you coordinate a program, design a better way of doing something or manage a team? It doesn't matter how insignificant the accomplishment may seem to you—just write it down.

Now use these accomplishments to construct a résumé that lists all the things you've done. List them in a manner that will demonstrate your diversity, self-motivation and interest in the field. Choose accomplishments that are credible and applicable to the position you want. If you're seeking a leadership position, be sure to show leadership accomplishments; if you are applying for an educational position, lead with teaching experience.

When describing your accomplishments, use big, exciting action verbs such as coordinated, responded, taught, founded and participated. Limit your accomplishments to the ones that portray you best, keeping in mind that the employer is only glancing at your résumé. Granted, no one is going to hire you on the basis of your résumé alone, but it may entice a prospective employer to consider you for an interview. Finally, your résumé should be short, interesting and professionally done. One page is usually enough. (For a different perspective on job-winning résumes, see "The Fine Art of Résumé Writing," on page 67.)

At the same time you do your résumé, make a list of three to five references. Use people who know you, are familiar with your work and have good connections in EMS, such as a paramedic; an EMS supervisor, director or chief; and a physician or emergency department nurse. An EMS instructor is also a good bet, as are previous employers. Make sure you contact all your references and tell them you are conducting a job campaign and would like to add them to your reference list. Then, in drafting your references, list people's names, titles, employers, and business addresses and phone numbers so they can be easily contacted.

Defining What You Want 🗷

To get a better understanding of your job-search parameters, answer the following questions.
1. I am seeking a job in the following locations:
2. I am willing to move for a job under the following circumstances:
3. My job must pay at least
4. I am willing to work for less money if this job will take me closer to my ideal job. Yes No
5. Other conditions I have for the job I seek (any other essentials, such as an unwillingness to work in a specific area, restrictions on shifts you will work, or anything else that is important in clarifying what you will or will not do in regard to an EMS position):
Now, take a few minutes and describe that job as completely as you can. The fol-

Now, take a few minutes and describe that job as completely as you can. The following is an example, again in regard to the paramedic student seeking a flight paramedic position.

I am seeking a full-time paramedic position with a busy emergency ALS service. The service must respond to 9-1-1 emergency calls and transports. The position must be in an environment that will help me perfect my patient care skills and give me the experience I need for future employment as a flight paramedic. The service I work for must have a good reputation and be known and respected by the flight services I'm interested in working for in the future. I'm willing to move to any location except the inner city or to a hot, humid climate. I need to make at least \$25,000 per year. I am willing to work some overtime and extra shifts, but my personal health and time for myself are important.

Appiving for a Job

While you may simply send your résumé to the organizations you'd like to work for along with a brief letter of introduction, keep in mind that this is a very ineffective way to get hired. Rather, you'll need to follow the employment process outlined by each organization, which will probably include completing an application to be kept on file. When you complete the application, send along a résumé, but don't rest. Continue to work your network.

When you hear about a possible opening, call the organization's personnel office to make sure your application is on file and is up-to-date. If in doubt, send in another application and résumé with a one-paragraph letter to the director or person doing the hiring. This puts your name in front of the director (if only for a moment) and demonstrates your interest without being irritating. It's generally not a good idea to call the director with employment questions.

Once you've applied for a job, be patient. Employers rarely make decisions when they say they will, and most do not like being bothered by impatient applicants.

Interviewing

The day will finally come when you are called for an interview and you have a chance to demonstrate why you should be hired over the 500 or so other applicants. You'll finally get to speak directly to a person who can make decisions. This is what makes interviewing so stressful, but you can approach your interview with confidence if you prepare with research, question preparation and practice.

Research. Go back to your 3x5 cards on the organization you'll be interviewing with. What is the exact scope of the service it offers? How many employees does it have? How many calls does it respond to each month? What are its standing orders like? What is the relationship between this organization and the community? What accomplishments has this organization made in the past five years? Have there been any recent advances or setbacks?

Once you've applied for a job, be patient. **Employers rarely** make decisions when they say they will.

Recently, a paramedic told me going to an interview. As he sat down employer asked him how he though would fit into the organization's cu climate. The organization was a hos based ALS service that had just been chased by a large HMO. The informs had been all over the paper and tal about throughout the EMS commun but the paramedic had not bothered any research and had no idea what

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Job Campaign continued from page 65/5-23 current situation was. Needless to say, he

was at a loss as to how to respond and was not hired.

Question Preparation. You will want to prepare a list of questions you may be asked and plan your answers. No one can say for sure how the interviewer will approach you-some interviews will be highly planned, while others will be punted.

Despite a long list of questions they may ask (see "Potential Interview Ouestions" below for a sample list), all interviewers are essentially looking for the answers to three basic questions: Why do you want to work in this organization? What can you do for this organization? What kind of person are you?

In preparing for your interview, write out detailed answers to these three questions. Then take a stack of 3x5 cards and write down 10 or so questions from the list below and any others you think might be asked, listing one question per card. Go over the questions by yourself and think through your answers.

Beyond questions, many EMS employers will give you a medical or rescue scenario with a potential conflict that has a hidden issue of patient care, organization loyalty or personal leadership. The

scenario will be presented, and you'll be asked how you would handle it. Don't be thrown off by this; simply imagine yourself in the scene and then tell what your priorities are. Also, be sure to mention that you will always try to represent the organization in a professional mannerthe manager is interested in your ability to think broadly, make the organization look good and not have tunnel vision.

Practice. The most valuable preparation for the interview is actually rehearsing the interview. Have someone sit across from you and ask the questions from your cards. While your first time answering these questions will be rough (that's why you're practicing), the second time through will be much better, and by the third time, you will begin to feel comfortable and relaxed. Most people neglect to do this practice and wind up fumbling in the interview when they really had good things to say. Remember, this is your big chance to get the job you really want.

Job Offers

Your interviews will eventually lead to a job offer. When an offer is made, consider it carefully and make certain it's the job you want. Most employers will give you several days to consider an offer.

Generally, you do not have much bargaining power in entry-level EMS positions. While pay scales are fairly fixed. you may be able to discuss certain issues as long as you remain calm and straightforward and don't try to play games. You can discuss hours, start dates and how much of your experience will be applied in the pay scale. The research you conducted during your job campaign will have given you a good idea about pay scales and benefits.

Perseverance

Following these guidelines for finding a iob in EMS will not guarantee success. but it will greatly improve your chances. If you fail to land a job in the organization you want, regroup and try again, or simply try a different organization. Keep in mind that not being offered a job is not a statement about your worth, value or

You can learn something from every job you try for. Chalk every application and interview up to learning, and continue on. Persistence is truly the most important virtue in job hunting. Everything in this business is always in a state of change. People quit or are injured or promoted all the time. Keep trying, and focus on what you really want. Above all, don't stop networking and talking with others. Inactivity is a death blow to your iob search.

I don't know a single person who has truly wanted a career in EMS who has not been able to find work. Some have had to work much harder than others. Some have even had to widen the parameters of their search, but eventually they find work. You can create your success. It may not come easily, but easy things rarely satisfy.

Potential Interview Questions

- 1. Tell us about yourself.
- 2. What brings you to EMS work?
- 3. What brought you to this job and this organization?
- 4. Where do you see EMS going in the near future?
- 5. What are the most satisfying aspects of EMS work to you?
- 6. What are your major strengths?
- 7. What are your major weaknesses?
- 8. Tell me about some of your accomplishments in life.
- 9. Tell me about your greatest mistake.
- 10. What are your long-range goals in EMS?
- 11. What makes a good EMT or paramedic?
- 12. How do you get along with other people?
- 13. If I was to ask former employers to describe you, what would they say?
- 14. How do your education and experience relate to this job?
- 15. How do you handle conflict?
- 16. How do your education and experience fit in with this job?

John M. Becknell, EMT-P, a writer and consultant in the Twin Cities, is a frequent contributor to JEMS. He has 18 years of experience in EMS and is the anthor of a forthcoming Jems book about creating success in EMS.

Frequently Asked Questions

What courses should I take in high school to prepare myself for the EMT Program?

Most students graduating from high school have sufficient academic preparation to succeed in the EMT Program. A common deficiency, however, is that students often have no chemistry background. Although chemistry can be taken at the college, students are encouraged to enroll in chemistry before graduating from high school. In addition, students should take courses that build their math and writing skills while in high school.

How do I go about transferring to a community college in order to complete the paramedic level of my associate degree?

Each participating community college offering the paramedic level of the two-year program has agreed to set aside a percentage of the total openings they have in their programs. These openings are specifically for students who have obtained EMT certificates. Application processes vary with each institution, but generally include submitting a program application to the college the student hopes to attend in addition to the college's application. Students should obtain the assistance of the Program Coordinator upon initiating the transfer process.

How do I get certified as an EMT when I've completed my courses?

Instructions on the process for obtaining certification are provided in EMT-Basic and EMT-Intermediate classes. In general, you will complete an application for certification, pay required fees, and take certification exams that are scheduled as part of a class. Your instructors will assist you with the process, but obtaining certification is ultimately your responsibility. Southwestern Oregon Community College will assist you with the application process and prepare you to take your exams. It is the Oregon DHS Emergency Medical Services and Trauma Systems, however, that will oversee your certification.

What happens if I fail a certification test?

If you fail a written or practical exam of the Oregon DHS you will need to follow rules established for taking the exam a second time. If you are ineligible for a same-day practical exam retake or need to take the written exam again, steps must be followed. You will need to contact the Oregon DHS, pay appropriate fees, and contact the EMT Program Secretary at the college for assistance in scheduling another exam.

Why do I have to take a placement test to take EMT classes?

All students enrolling in regular programs at the college are required to take placement exams. The results of the exams assist advisors to select courses for a student that will lead to their success. The college wants to insure the success of every EMT student. Volunteers affiliated with area fire and EMS agencies are also expected to complete placement tests prior to enrolling in an EMT-Basic course. The tests help advisors assist and support students who may need to work on basic academic skills in order to complete an EMT course. A student's placement test scores will not prevent them from enrolling in an EMT Certificate Program or EMT-Basic class.

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NOTE: Courses may be offered in terms other than those specified above. This is only a guideline. Contact your advisor for the most accurate term offerings.

Course Descriptions of Required Classes for the Emergency Medical Technician Certificate Program

Emergency Medical Requirements

BI 231 - Human Anatomy and Physiology - 3 Credits - 3 Lecture Hrs/Wk A review of inorganic and organic chemistry including discussion of metabolic pathways. In addition, cell structure, tissues, and the integumentary, skeletal, and muscular systems are considered.

BI 232 - Human Anatomy and Physiology - 3 Credits - 3 Lecture Hrs/Wk A detailed study of the anatomy and physiology of the respiratory, digestive, urinary, endocrine, and reproductive systems are included.

<u>BI 233 - Human Anatomy and Physiology</u> - 3 Credits - 3 Lecture Hrs/Wk A detailed study of the anatomy and physiology of the cardiovascular, lymphatic, nervous systems, and special senses are included.

<u>HE 257A/B - Enhanced Emergency Medical Technician-Basic A/B</u> - 10 Credits - (80 Lecture Hours - 60 Lab Hours - 10 Field Study Hours Total)

This course prepares individuals for certification in Oregon as an Emergency Medical Technician-Basic. Develops skills in recognition of symptoms of illness and injuries and proper procedures of emergency care.

Prerequisites: Students are required to complete a special application and meet minimum entrance requirements to register for the course. Application information can be obtained through the EMT Program Director's Office or the Student Services Office.

HE 942 - Introduction To Emergency Medical Services - 3 Credits - 3 Lecture Hrs/Wk This course covers the role and responsibilities of the paramedic, emergency medical services systems, medical-legal considerations, major incident response, hazardous materials awareness and stress management.

HE 943 - Emergency Medical Technology Rescue - 3 Credits - 3 Lecture Hrs/Wk This course covers elementary procedures of rescue practices, systems, components, support, and control of rescue operations including ladder procedures and basic rescue tools of patient extraction, emphasizing application to traffic accidents, as required for paramedic certification.

HE 944 - Emergency Communication and Patient Transport - 3 Credits - 2 Lecture-3 Lab

This course covers ambulance operation, laws, maintenance, and safety; emergency response driving and route planning; communication systems, radio types, HEAR system, codes, and correct techniques.

OA 2221 - Medical Terminology I - 3 Credits - 3 Lecture Hrs/Wk Introduction to medical terminology including medical prefixes, suffixes and word stems. Study in each system is categorized into additional prefixes and suffixes, diagnostic, symptomatic and operative terminology. Basic coverage of body systems and of skeletal structures.

Other Required Classes

<u>CJ 203 - Crisis Intervention</u> - 3 Credits - 3 Lecture Hrs/Wk Crisis intervention covering domestic violence, problems with juveniles, substance abuse, legal and social restrictions and implications and methods of prevention and reference.

MTH 70 - Elementary Algebra - 4 Credits - 4 Lecture Hrs/Wk
The transition from arithmetic to algebra for students with little or no previous
experience in algebra. Includes concepts of numbers, integers, inequalities, solving
linear equations and rational expressions, their generalization and simple algebraic

Prerequisite: Appropriate score on placement test or successful completion of MTH 20 or MTH 30 with a C or better or instructor consent.

WR 121 - English Composition - 3 Credits - 3 Lecture Hrs/Wk
Presents the fundamentals of expository prose through the development and frequent
exercise of writing abilities. Designed to help students learn the use of unity, clarity,
Constitution 14/2 00 miles.

Prerequisite: WR 90 with a grade of C or above, placement test score or instructor consent.

Please refer to the Southwestern Oregon Community College Catalog for a description of the Social/Behavioral Science elective courses offered to fulfill this requirement. Please note that ANTH 103 General Anthropology is recommended to fill the Social/Behavioral Science elective, but it is ultimately your choice.

Steps You Must Take To Enroll In The Emergency Medical Technician Program

- Fill out the application for admissions at Southwestern Oregon Community College (to obtain an application stop by Southwestern or call (541) 888-7405).
- Contact the Counseling Center at Southwestern and arrange an appointment to take the ASSET /COMPASS placement test. (You may stop by Educational Support Proggrams and Services in Stensland Hall at Southwestern, or call (541) 888-7405).
- Complete the EMT Program Enrollment Application and Prerequisite Verification Form before enrolling and attending an EMT-Basic or EMT-Intermediate class. (Applications may be obtained from Paul Reynolds or Robbie Kirch at their office located in the Fire Science building or from the Registrar's office located in the Administration Office in Dellwood Hall.)
- Make an appointment with Paul Reynolds the Coordinator of the EMT Program or another EMT advisor. Be sure to bring a copy of the placement test results with you to your appointment.
- If you are planning on receiving financial aid you will need to stop by the financial aid office in Dellwood Hall at Southwestern, or call (541) 888-7410.
- Register for classes after meeting with your advisor and obtaining all required signatures.
- Show up for class at least one class period of each class on the first week of school so you won't be automatically dropped from your classes. If for some reason you will be unable to make it to the first week of classes you must contact your instructors and request that you not be dropped from the class.
- Be prepared for a challenging and enjoyable experience at Southwestern Oregon Community College.

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EMT Student Handbook August 2003

Southwestern Oregon Community College Application for Admission

Follow these Steps to Enroll

Are you pursuing a degree? Taking 12 or more credits?

Applying for Financial Aid, Veterans Benefits,

Scholarships, or Internships?

If you answered yes to any of the above...

Complete this application form, enclose a check or money order for \$27.00 (non-refundable), mail it to the Cashier at Southwestern:

Southwestern Oregon Community College **Attn: Admissions Office**1988 Newmark Ave.
Coos Bay OR 97420

2. **If you are transferring** from another college or university, ask that institution to forward your official transcript to the below address:

Southwestern Oregon Community College **Attn: Transcript Evaluator** 1988 Newmark Ave. Coos Bay OR 97420

- Take the placement exams. Applicants with prior college credit in Math, Reading and Writing may be exempt. Applicants who have ACT scores may be able to use those instead. Please call (541) 888-7405 for details.
- 4. **All out-of-district/out-of-state students** attending Southwestern with less than 45 earned college credits, are required to live in student housing unless you have a dependent, are a veteran, are 21 years of age prior to the first day of classes, or if student housing is full. If you have further questions, please call (541) 888-7635.

You will receive a letter of acceptance after your application is processed

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Application For Admission

A non-refundable fee of \$27.00 must accompany this application

Southwestern Oregon Community College

Admissions Office 1988 Newmark Ave.

Coos Bay OR 97420

Personal Information: Providing your social security number is voluntary. If you provide it, the college will use your social security number for keeping records, doing research, and reporting. The college will not use your number to make any decision directly affecting you or any other person. Your social security number will not be given to the general public. If you choose not to provide your social security number, you will not be denied any rights as a student. Please read the statement in your class schedule, which describes how your number will be used. Providing your social security number means that you consent to use of the number in the manner described. Under Federal law, address information may be considered directory information for military recruitment purposes. Personally identifiable data may be reported to the IRS for tax credit eligibility.

El proveer su numero social es una accion voluntaria. El colegio lo utilizara para mantener sus archivos, hacer estudios, agrega relatando, extendido credito y cobrando las duedas. Su numero no ser proveido al publico en general Si Ud decide no proveer su numero social no se la negara ningun derecho como estudiante. Favor de leer la frase en la pagina dos de su formulario de classes que describe como sera usado su numero. El proveer su numero indica que Ud da permiso que se use su numero en la manera descrita. Debajo de la le federal, la informacion de la diression puede ser consideria el directorio de informacion para intenciones de reclutarmente militar. Data personal de identificacion tal vez reportaria a la IRS para credito in

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	Preferred Name:									 -	············	
4.	Permanent Mailing Address:							·· ·	·	*		
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	☐ In-State Resident? US Citizen residing in CA, ID, WA, NV	OR,	[US C		Resident? Non-OR, CA, I sident	D,			Have you	esident A ou lived i 90 cons ⊒ Yes □	n Oregon ecutive
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Last High Scho	ool attended:Name		Dity	State
If yes, yea If no, do y Do you ha	high school graduate? ar of graduation you have a GED? ave an Adult High School Diplo till attending high school?	Yes ☐ No ☐		
nstitution where	e GED was earned:			
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I will be stand I will be stand I Term I am atten I have atte	arting Southwestern: The contract of the first time.	Y N Y N	ner Term □ Year_	
college inst Transfer s	Colleges Attended: List all ins titution, write "NONE." Please, tudents must contact their pr	no abbreviations.	have an official trans	cript sent to the college.
Name: State:			Dates Attended:	Degree Earned:
Name: State:			Dates Attended:	Degree Earned:
		···	Dates Attended:	Degree Earned:
Name: State:			100	
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State: 3. Education If you entered application tha 1002- 4. Education 1. Yes, Cer 2. Yes, High	1002 above (the Associate of	Arts Oregon Transfer), e zation you plan to pursu	enter the 3-digit code from a four-year institut a degree/certificate at 4. Transfer to another	Southwestern?
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3. Education If you entered application tha 1002- 4. Education 1. Yes, Cer 2. Yes, High 3. No, Here 5. Primary G Please cir 1. Take clas 2. Learn sk 3. Improve 4. Explore 5. Take clas	1002 above (the Associate of Ast specifies the area of specialized) n Objective: (Circle all that apprintificate or 2-year degree h School diploma or GED to take classes Goal: Which of the following is accessed to transfer to a 4-year collicills to get a job job skills career or educational options	Arts Oregon Transfer), ezation you plan to pursuoly) Do you plan to earroyour primary goal in atte	enter the 3-digit code from the at a four-year institut. a degree/certificate at 4. Transfer to another 5. Take classes to transfer. Undecided ending Southwestern? 6. Improve writing, recompleted to the control of	Southwestern? 2-year college asfer to a 4-year college eading, or math skills

Southwestern Oregon Community College

2003-2004 Degrees Offered

	ssociate of Arts
10	regon Transfer
A	02 Associate of Arts Oregon Transfer AOT Area of Specialization:
21	5 Administration of Justice
01	THE PROPERTY OF THE PROPERTY O
01	1 Agriculture
220	O Anthropology
020	Architecture
100	
194	Biochemistry/Physics
040	⁾ Biology Botany
050	Pasifiess Administration
804	Paginess Education
190 211	Onomistry
211	Community Service/
070	Public Affairs
523	Computer Science
124	Dental Hygiene
537	Dentistry- Pre Professional Diesel Power Technology
224	Economics
802	Education- Elementary
	Certification
803	Education- Secondary
	Certification
900	Engineering
151	English
196	Environmental Sciences
544	Fire Services Administration
603	Foreign Languages
114	Forestry
191 491	General Sciences
101	General Social Sciences
490	General Studies- Art
226	General Studies- Humanities Geography
195	Geology
836	Gerontology
102	Graphic Design
837	Health and Health Education
838	Health Care Administration
225	History
130	Home Economics
200	Hotel/Restaurant Management
221	Human Services
538 998	Industrial Management
996 054	Interdisciplinary Studies
021	International Studies
141	Landscape Architect Law-Pre Professional
142	law Enforcement and o
201	Law Enforcement and Corrections Library Science
539	Manufacturing Tech
70	Mathematics
525	Medical Tech Prep
26	Medicine
05	Music
03	Nursing

Small Business

Entrepreneurship Option

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	121				•
	159	Philosophy		Cni	ninal Justice Administration
	835	Physical Education		2130	- 411 OCCOLO CHICEL ODITION
	122	Physical Therapy		2137	Law Enforcement Officer Operan Services
	192	Physics		2122	- -
	227	Political Science		2119	Total Rology Option
	111	Psychology		آمده ا	Octor Services Option
	213	Parks and Recreation Manageme	ent		Substance Abuse Option ufacturing Technology
	228	rvengious Studies		2133	Fabrication/Welding Tech Op
	156	Sociology		2115	
	602	Speech Tech Journalism		One	Year Certificates
	107	Theater		of (Completion
	128	Veterinary Medicine		2151	
	407	Zoology		2257	. toodanting
	999	Undecided Transfer		1 220,	· · · · · · · · · · · · · · · · · · ·
	599	Undecided Vocational		2155	Exam Preparation
	Ass	ociate of Science		2156	Bookkeeping/Clerical Childhood Education and
	Emp	hasis			Family Studies
	1043	Athletic Training		2186	Computer Technician
	1022	Business Administration		2253	Computer Technician
	1070	Childhood Education and		ľ	Examination Preparation
		Family Studies		2183	Culinary Arts: Chef Training
	1005	Computer Sciences		2198	Para Educator/
	1011	Criminal Justice Administration			Educational Assistant
	1040	⊏ngineering		2161	Emergency Medical Techni
	1051	Environmental Technology	ĺ	2260	Employment Skills Training
	1052	Fisheries and Wildlife	ĺ	2181	Fabrication/Welding Technol
	1042	Fitness Management		2162	Juvenile Corrections
	1053	Forestry	ı	2165	Machining/Manufacturing
	1034	Horticulture	ĺ	2207	rechnology
	1050	Human Services		2169	Marketing
	1048	Mathematics Music		2171	Medical Clerical
	1055		-	2254	Medical Transcription
	1060	Natural Resources Natural Science	ı		Network Certification
		iate of Applied Science	1	2255	Examination Preparation Network Fundamentals
	2301	Apprenticeship Trades	1	2188	Network Technician
-	2114	Childhood Education and	1	2178	Office Administration/Office
-		Family Studies			Occupations
1	2113	Computer Information	1	2180	Pharmacy Technician
ĺ		Systems: Software Support	1	2174	Rural Health Aide
1	2110	Culinary Arts	l	2187	Software Application Speciatis
		Management Training		2252	Software Certification
ł	2118	Environmental Technology		0405	Examination Preparation
ľ	2116	Fire Science		2185 2211	Surgical Technology
l	2127 2128	Medical Assistant		2189	Supervision
	2129	Network Design & Administration	ĺ	2256	Web Production Specialist
l	2112	Nursing			Web Site Fundamentals
	2135	Technical Support		2201	ng Opportunities
	2130	Turf and Landscape Technology		2201 2202	Basic Nursing Assistant
		Web Dev. & Administration s Management		2202 2204	Medication Assistant
	2105	Accounting Option			Perioperative Nursing
	2107	Marketing Option		3401	Education Diplomas
	2109	Office Management Option	•	3301	Adult High School
:	2108	Small Business	•	וטטעו	GED

Justice Administration Corrections Officer Option Law Enforcement Officer Option Services Gerontology Option Social Services Option Substance Abuse Option turing Technology Fabrication/Welding Tech Option Industrial Electronics Tech Option ear Certificates npletion Accounting Advanced Network Certification Exam Preparation Bookkeeping/Clerical Childhood Education and Family Studies Computer Technician Computer Technician Examination Preparation Culinary Arts: Chef Training Para Educator/ Educational Assistant Emergency Medical Technician Employment Skills Training abrication/Welding Technology luvenile Corrections Machining/Manufacturing echnology farketing ledical Clerical ledical Transcription letwork Certification xamination Preparation etwork Fundamentals etwork Technician ffice Administration/Office ccupations narmacy Technician ıral Health Aide oftware Application Specialist oftware Certification camination Preparation rgical Technology pervision eb Production Specialist eb Site Fundamentals **Opportunities** sic Nursing Assistant dication Assistant ioperative Nursing

Southwestern Oregon Community College

EMERGENCY MEDICAL TECHNICIAN PROGRAM

,		
Read	Write	Math
yes/n	10	
		Read Write

BASIC

COURSE ENROLLMENT APPLICATION AND PREREQUISITE VERIFICATION FORM

This course application and verification form must be completed in its entirety and copies of documentation must be attached before a student can enroll in an EMT course. Students may not attend classes without completing registration for courses in advance. Questions about this application should be directed to Paul Reynolds (888-7296) or Robbie Kirch (888-7432).

Course Information

Course Beginning Term	(check one):	Fali _	Winter	_Spring	// Ye	ar
Location of Course:	Southwe	stem Oth	er Site:			
ersonal Information		[Orivers License No.	·	s	state
Name			Soc. Sec. No			
Address						
City						
Are you enrolled in the o	ne year EMT ce	rtificate pro	gram at SWOCC?	Y	es	No
Do you work with an age	ency providing en	nergency m	edical services?	Y	'es	No
his section needs to be comple pplicants should obtain the ass formation. Agency Affiliation	istance of their a	igency admi	inistrator in order to	o provide	e the folk	owing
Address		City	s	tate	Zip	
Applicant's Agency						
Pregon law requires that student insurance in the amount of not le from your agency must verify the Agency Insurance Provider	s participating in ss than \$1,000,00 following inform	clinical/amb 90 per occur nation.	oulance experiences rence (OAR 581-498	be cove 3-020). A	red by pi In admini	isuauve onicer
Address						
certify that the individual named	d in this applicati					
dentified in the amount indicated	7 aoove.					
Signature of Agency's Au	uthorized Repre	esentative	Da	ate	E)	лт-Basic (8-19-3)

EMT-Basic Course Prerequisites

Students pursuing the EMT Certificate Program and/or EMT-Basic course must satisfy the following prerequisites prior to registering in courses. Certificate Program students should consult with their advisor.

- 1) 18 years of age minimum
- 2) high school diploma or GED
- 3) documentation of immunizations (see section E below)
- 4) urinalysis required before clinical / field study time (arrangments made by college)
- 5) Southwestern placement exam results demonstrating skill level to (see note below):

Math 70

Reading 101

Writing 121

(minimum score of 48)

(minimum score of 47)

(minimum score of 43)

NOTE: The Southwestern placement test is used for advising purposes. Students scoring below the minimum levels listed will be referred to the EMT Program Coordinator for approval to register for EMT-B. Students scoring lower than the levels indicated should consider enrolling in courses that will build their skills and improve their chances of succeeding in the EMT-Basic course.

Documentation of Immunizations

Entrance into EMT courses is restricted to individuals who have the immunizations as required by Oregon Administrative Rules. The immunizations are required to work in health occupations. You must attach a signed immunization record and/or titers indicating immunization for the following:

Measles (MMR) Hepatitis B **Chicken Pox** Diphtheria Tetanus (DPT) series Oral Polio (OPV)

Tuberculosis: A negative PPD within two months of starting clinical is mandatory

All records must be signed, dated, have the letterhead of the clinic and be legible.

Waivers and Acknowledgements

Read each of the following statements and through your signature verify that you understand and accept that which is stated.

INVASIVE PROCEDURE

I understand that as an EMT student at Southwestern Oregon Community College I will be performing invasive procedures and may have invasive procedures performed on me by fellow students under the supervision of the instructor. I am aware of, understand, and fully accept any of the physiological and psychological risks involved in this procedure.

Signature of Applicant	/ Date
------------------------	-----------

OREGON HEALTH DIVISION EMT CERTIFICATION

The Oregon Health Division requires applicants for certification to complete an extensive personal history form addressing the applicants physical, mental, and emotional health. I understand that Southwestern Oregon Community College cannot guarantee that I will become certified as an EMT and that certification is a matter between me and the state.

Signature of Applicant	/ Date
------------------------	-----------

CERTIFICATION OF APPLICATION

I have read and understand the admission requirements for enrollment in the EMT Certificate Program and EMT courses at Southwestern Oregon Community College. I certify that the information contained in this application, or attached to it, is correct and that any deficiencies will be remedied. I understand that failure to remedy a deficiency within a reasonable period of time will result in my being withdrawn from the EMT program or course.

	•
Signature of Applicant	// Date
O	Date

Southwestern Oregon Community College

EMERGENCY MEDICAL TECHNICIAN PROGRAM

EMT-Intermediate (08-19-03)

INTERMEDIATE

COURSE ENROLLMENT APPLICATION AND PREREQUISITE VERIFICATION FORM

This course application and verification form must be completed in its entirety and copies of documentation must be attached before a student can enroll in an EMT course. Students may not attend classes without completing registration for courses in advance. Questions about this application should be directed to Paul Reynolds (888-7296) or Robbie Kirch (888-7432).

Course Information								
Course Beginning Term	ı (check one):	Fall	Winter	_Spring // `	/ear			
Location of Course:	Southwes	stern Othe	r Site:					
Personal Information								
Name			Soc. Sec. No.					
Address								
City								
Are you enrolled in the	one year EMT ce	rtificate progi	ram at SWOCC?	Yes	No			
Do you work with an ag	ency providing er	nergency me	dical services?	Yes	No			
information. Agency Affiliation	Tı	raining Office	r	Phone				
Address Applicant's Agency								
Oregon law requires that studen liability insurance in the amount officer from your agency must v	ts participating in of not less than \$	clinical/ambu 1,000,000 per	lance experiences	be covered by	professional An administrativ			
Agency Insurance Provider_		 	Phone No.					
Address			Policy No					
I certify that the individual name agency identified in the amount	d in this application indicated above.	on is covered	by professional lia	bility insurance	through the			
Signature of Agency's A	uthorized Repre	esentative	Date	<u></u>				

EMT-Intermediate Course	December 1	
Students applying for an EMT into	<u>Prerequisites</u>	makine st e u
enrolling in a course. Please provide	rediate course must ; everification for each	satisfy the following prerequisites prior to formally prerequisite listed. In addition, students must tal
an EMT-I Pretest that is scheduled at	the beginning of co	urses.
Oregon Certified EMT-Basic:	Certificate No	Expiration
Course Completion Document:	Certificate Type	RC "BLS for the Professional Rescuer" CPR Expiration
Documentation of Immunic	ation -	
FILITATICE INTO EMIT COURSES IS MOTORAL	- d 4 - 1 - 11 - 1 - 1	have the immunizations as required by Oregon
Administrative Rules. The immunizati	Offs are required to a	riave the immunizations as required by Oregon
signed immunization record and/or tite	ers indicating immuni	have the immunizations as required by Oregon vork in health occupations. You must attach a zation for the following:
Measles (MMR)		
Hepatitis B		
Chicken Pox		
Diphtheria Tetanus (DPT) se	ries	
Urai Polio (OPV)		
Tuberculosis: A negative PPI	D within two months	of starting class is mandatory
All records must be signed, date	d have the letter	hand the second
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Waivers and Acknowledgem		
Read each of the fall	<u>ients</u>	
accept that which is	ents and through yo	our signature verify that you understand and
accept that which is stated.	_ •	and and
INVASIVE PROCEDURE		
Understand that as an ENT		•
invasive procedures and may be	ent at Southwestern	Oregon Community College I will be performing
supervision of the instructor 1 on	e invasive procedure	Oregon Community College I will be performing as performed on me by fellow students under the
psychological risks involved in thi	i aware of, understai s procedure.	es performed on me by fellow students under the nd, and fully accept any of the physiological and
Signature of A. J.		/
Signature of Applicant	· 	Date
OREGON HEALTH DIVISION EM	T CERTITION	
The Oregon Health Division as and	CERTIFICATIO	N
history form addressing the applie	es applicants for cer	tification to complete an extensive personal
Southwestern Oregon Community	ants physical, menta	tification to complete an extensive personal I, and emotional health. I understand that
that certification is a matter between	College cannot guar on me and the state.	I, and emotional health. I understand that rantee that I will become certified as an EMT and
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Signature of Applicant		Date
CERTIFICATION OF APPLICATION		
have read and understand the	!	
and EMT courses at Southwestern	mission requirements	s for enrollment in the EMT Certificate Program
in this application, or attached to it	Oregon Community	s for enrollment in the EMT Certificate Program College. I certify that the information contained
that failure to remedy a deficiency	is correct and that a	College. I certify that the information contained my deficiencies will be remedied. I understand
from the EMT program or course.	widini a reasonable p	operiod of time will result in my being withdrawn
0		1
Signature of Applicant		Date

Date

OREGON EMERGENCY MEDICAL SERVICES

EMS STUDENT REGISTRATION

P.O. BOX 14450 • PORTLAND, OREGON 97214 • 503-731-4011

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GE	NDER
	○ Female

ETHNIC ORIGIN

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CANDIDATE FOR	LEVEL OF EDUCATION Mark only one item above the pink lin	e .
EMT-Basic	① ② ③ ④ ⑤ ⑥ ⑦ ⑥ ⑨ ⑩	D
☐ EMT–Intermediate	☐ High School ☐ Bachelor's Degree ☐ Master's Degree ☐ Docto	orate Degree
. EMT-Paramedic	Some College Some Post-Bachelor's Some Post-Master's Post-I	Doctoral
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		If Yes, Previous Name:		
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		N DRIVER	PERSONAL HISTORY	
	00000000000 IIC	E NUMBER	ertification as an EMT. IMPORTANT: If you answer "YES" to any of the	following questions,
CITY STATE RES	SIDENCE/STREET ADDRESS	This information is used to determine eligibility for cer	rtification as an EMT. IMPORTANT: If you answer "TES" to any of the distribution, in a sealed envelope marked "CONFIDENTIAL." If you fail to pured you will receive a request for additional information from the	o attach appropriate Section Failure to
		would attack a complete explanation is requested attack a complete explanation is requested with	dication, in a sealed envelope marked "CONFIDENTIAL." If you tall quired, you will receive a request for additional information from the result in a delay of certification. Answering "YES" will NOT necessaril	ly result in denial of
	00	provide full and complete explanatory material WILL your application for certification.	result in a series	
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	RESIDENCE COUNTY 4 4	(1) Have you been diagnosed with any mental o	or physical impairment(s) that may affect your ability to	
		(5) (5) (5) (5) (5) (6) (7) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	or physical impairment(s) that may affect your about, or so of the certification level for which you are requesting, as	
		defined in ORS Chapter 682, the DHS/EMS	IND DESCRIPTION OF LIVE A WING GIVE A PROPERTY	Yes No
		① ① ① ① 2 Have you engaged in the use of any chemica	al substance for other than legitimate medical purposes or	Yes No
	Jackson Marion Wasco	State been treated for addiction or dependency?		103
	Jefferson Morrow Washington	- 1 1 1 1 1 1 1 1 1 1	to the among treatment for alcoholism?	Yes No
	Josephine Multnomah Wheeler State	3. Have you engaged in the habitual use of alco	onoi or received treatment for alcoholism	
	C Klamath C Polk C Yamhill Number	4. Have you ever been convicted of any misde	meanor, felony or other crime?	Yes No
	Out of State Expiration	4. Have you ever been convicted of any made	ny involving driving while impaired, intoxicated, or under	
W. M. W. M.	CODE OUT OF COUNTRY ZI	the influence of any drug or alcohol (DOI, E	DUIL, etc.) MUST be reported. (Minor traffic violations need	
6 0 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	+	not be reported.)		Yes No
		5. Have you been disciplined by your employe	er or supervising physician? ring: limitation or restriction of scope of practice; suspension,	/
	DDDD APPLICANT SIGNAT	(Discipline would include any of the following	ing: limitation of restriction of scope of process	
	2 2 2 2 I hereby attest to the validity and	letter of reprimand, or dismissal for cause.)		
	3) 3 3 3 4 the information provided to the St	of Dregon 6. Have you been named in a lawsuit alleging	medical malpractice or misconduct?	Yes No
	1 understand that providing inaccurate on this application can res	- actiff		
	5 5 6 6 6 ineligibility, license revocation, or	her penalties 7. Have you been disciplined, denied or revol	ked by the National Registry of EMTs or any	Yes No
	D D D D D	7. Have you been disciplined, defice of reversion certifying/licensing agency?		103
	8 8 6 9 6 X			
TYTHE TOWNSTREET	9 9 9 9 Signature of Applicant		A 2002 SELIC Date	Systems, Inc. Phoenix, Ariz
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OREGON EMERGENCY MEDICAL SERVICES

P.O. BOX 14450 . PORTLAND, OREGON 97293 . 503-731-4011

WORK HISTORY

List in chronological order all work/volunteer experiences from high school or the last ten years, whichever is less. If you do not know the exact dates, please estimate. All information must be placed directly on this form; a resume is not acceptable. If additional space is required, attach an

EMPLOYER (LIST MOST RECENT FIRST)	CITY, STATE		
	CITY, STATE	OCCUPATION	DATES FROM/TO
			FROM/10
		·	
			

EMT CERTIFICATION FEE INFORMATION

45932-31300-2901

Physician Signature

PremierView[™] forms by NCS Pearson MM234771-2 654

License #

IMPORTANT: You may only apply for ONE certification level at a time. You must obtain certification at that level before you consider applying for a higher level of certification. Your attached check must be for the amount checked below.

- \$25 EMT-Basic Oregon reciprocity application.
- \$55 EMT-Basic application, written and practical examination fee.
- \$75 EMT-Intermediate application, written and practical examination fee.
- \$200 EMT-Paramedic application, Oregon reciprocity application, written and practical examination fee.
- \$25 EMT-Paramedic provisional certification fee.

(This is in addition to application and examination fees.) 45932-31300-2901 Make check or money order payable to "DHS Health Services." Mail the completed application with the appropriate

DHS Health Services Business Services Section - 459 P.O. Box 14260 Portland, OR 97293-0260

APPLICANT SIGNATURE

I have read and understand the provisions of ORS Chapter 682 and Oregon Administrative Rules Chapter 333

I understand that the making of false statements in connection with this application is a violation of ORS 162.085, and may constitute grounds for denial, suspension, or revocation of an EMT certificate.

Signature of Applicant

Date

Office Use Only **EMT-Basic Application** I am submitting this application to test at The National Registry Date Received Name of Facility of Emergency Fee Number Medical Technicians State Date (MM/DD/YY) Vritten Exam Date Application Date Social Security Number Have you ever applied for NREMT-B registration? O Yes O No ilf you possess current state certification as an EMT, please list your current state EMT Current EMT Number certification number in the space provided and attach a copy of your current EMT card ase attach copy of card Mailing Address Program Code Gender State Zip Code + 4 Date of Birth ○ Female APPROVED EMT-B COURSE: Applicant must have completed an approved EMT-Basic Training Program that equals or exceeds the objectives of the National Standard EMT-Basic Curriculum. Attach a copy of your course completion certificate or a copy of your current EMT-B card. If your initial EMT-Basic training program is more than two years old and you hold current state certification as an EMT-Basic, you must document completion of 24 hours of approved EMT-B refresher training within the past two years and attach official documentation to this application. Name of initial training institution or agency | Street Address City State Zip Code Initial Course Instructor/Course Coordinator Course Completion Date Classroom Hours Refresher Course Instructor/Course Coordinator Refresher Completion Date Classroom Hours What is the highest level of Please indicate the type of EMT-B service you Will you be paid for **Ethnic Origin** education you have completed? are or will be affiliated with, (mark all that apply your services as an EMT-B? O Didn't complete high school ○ Fire Department ○ U.S. Government Yes Native American High school graduate/GED Private O No ○ Armv Asian Associate's degree Navy O Not yet affiliated O Black O Bachelor's degree 3rd-Service Air Force O Hispanic Graduate degree Volunteer Coast Guard White
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 Descriptio Other Other Licensing Action and Felony Statement Have you ever been subject to limitation, suspension, or termination of your right to practice in a health care occupation or voluntarily surrendered a health care licensure in any state or to an agency authorizing the legal right to work? If you answered "yes" to either question, you must provide official documentation that fully describes the offense, current status, and No Have you ever been convicted of a felony disposition of the case Candidate Statement and Signature: I hereby affirm and declare that the above information on this application is true and correct and that any fraudulent entry may be considered a sufficient cause for rejection or subsequent revocation. I further agree to abide by all policies and procedures of the National Registry of EMTs, and hereby authorize the NREMT to release my examination scores to the teaching institution/agency, any state office of Emergency Medical Services, or any agency authorizing the legal right to practice. Applicant Signature I further permit the NREMT to release my current status (registered or not registered) with the NREMT to the public 30 days following mailing of my test scores. **EMT-Basic Practical Examination Verification** This is to verify that on completed a state-approved Candidate's Name Date (MM-YYYY) practical examination at ExaminationSite and State equal to or exceeding the criteria established by the NREMT and performed satisfactorily so as to be deemed competent in the following skills: Patient Assessment/Management - Trauma Bag-Valve-Mask (Apneic Patient) Patient Assessment/Management - Medical Spinal Immobilization (Seated or Supine Patient) Cardiac Arrest Management/AED Random Skill Verification Physician Name (Print or Type) Agent or Assignee's Name (Print or Type)

Agent or Assignee's Signature

Agent or Assignee's Title

Printed in U.S.A.

477121

Section I: CPR Credential			
As the candidate's CPR instructor/training of performed satisfactorily so as to be deemed	officer, I hereby verify the car I competent in each of the fo	ndidate has been examined and	
Adult 1 & 2 Rescuer CPR Adult Obstructed Airway Maneuvers Child CPR Verify	Expiration Date	Date	Please submit a copy of your current CPR card and/or ensur the appropriate verification signatures are affixed to this section of the application
Section II: Statement of Communications	┙ <u>└┈-</u> ┤ ̄┃ ┃ ┃ ┃ ┃		Total of the application
Section II: Statement of Competency in	n EMT-Basic Skills		
As the EMT-Basic Training Program Director has been examined and performed satisfactor Patient Assessment/Man Patient Assessment/Man Cardiac Arrest Managem Bleeding Control/Shock Mag-Valve-Mask Apneic F Supplemental Oxygen Ad Upper Airway Adjuncts an	agement - Trauma agement - Medical ent/AED Management Patient ministration d Suction	Mouth-to-Mask with Supplement Spinal Immobilization Supine Pat Spinal Immobilization Seated Pat Long Bone Immobilization Joint Dislocation Immobilization Traction Splinting	skills: ^{(Candidate's} Name) al Oxygen
Signature:		_	
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Character Reference		relepnone #	
Name	04		
	Street Address	City	State Zip Code
Entry Requirements: National	l Registry EMT-Basic A	pplication Information	
 Successful completion of a state-approved EMT the EMT-Basic National Standard Curriculum as If the candidate's initial EMT-Basic training completion of 24 hational Standard Refresher Curriculum. Progra Current CPR credential verifying competence in The EMT-Basic Practical Examination Verifical assignee of the physician attesting to the candidate the criteria established by the NREMT. Section II: Statement of Competency in EMT-Training/Operations. Applications submitted fo Submission of a completed application and official entry requirements of the National Registry of EMT. A non-refundable, non-transferable application fewith this application. Each attempt of the written examplication fee. Successful completion of the National Registry EMT. 	Basic training program within to developed and promulgated by oletion date is beyond 24 month nours of state-approved EMT-Basic skills listed in the "CPR Creation section of the application rates successful completion, with Basic Skills (above) must be some and course completion documents and course completion documents and course completion documents and states successful course submission of \$20.00, payable to the National States written examinations.	the past 24 months, that equals or experiment of Transportals and the candidate has maintained asic refresher training that meets all der than 24 months from the date or electrical section of this application, must be signed by the Physician Menin the past 12 months, of a practical signed by the EMT-Basic Training Professional by the EMT-Basic Training Profession attesting to the above requiremental section attesting to the above requiremental section and a \$20.00 nor for an application and a \$20.00 nor for the section attestion and a \$20.00 nor for the section and the section	state certification as an EMT-Basic, objectives of the current EMT-Basic f testing. dical Director or the agent or I examination that meets or exceeds ogram Director or the Director of and signed in an original fashion. Technicians, must be submitted technicians, mon-transferable
Have you, your Physician Medical Director and/or	National Registry EMT-Ba	sic Examination Process:	
Have you, your Physician Medical Director, and/or submitted for each re-examination must also be a Have you attached a copy of your CPR card which signature to the appropriate space in the "CPR Cr. 3. Have you care	Journal mile director or service	director of training	ed the application? Applications CPB instructor affixed his author

- signature to the appropriate space in the "CPR Credential" section of this application?

 3. Have you or your program director attached to this application official documentation of successful completion of state-approved EMT-Basic training which

 4. Have you filled in all of the information of the current EMT-Basic National Standard Curriculum? 4. Have you filled in all of the information requested on the application, including the felony statement?
- 5. Have you attached a check or money order in the appropriate amount to this application. Each attempt of the written examination requires submission of 6. Be sure to bring an official photo identification (driver's license) and two #2 pencils to the examination site.
- 7. For more information please visit our homepage at http://www.nremt.org or contact us via telephone at (614)888-4484.

Payments or contributions to the NREMT are not deductible as charitable contributions for Federal Income Tax purposes. Payments may be deductible as a business expense. If in doubt, please contact your tax advisor.

477122

Emergency Medical Technician Program Southwestern Oregon Community College

Clinical Objectives for EMT-B Student Hospital Experience

Adopted from EMT-Basic National Standard Curriculum

The clinical objectives listed below are to be carried out under supervision and in accordance with hospital policy and established clinical agreements. Students should observe, and demonstrate whenever possible, the clinical objectives listed. The student's instructor or assigned preceptor should initial and date each objective when it is attained. In situations where objectives are not achievable in allotted time, programmed patient simulations or other activities may be used to ensure student competency.

Name of EMT-B Student	_Phone Number_			
Course Director	_Phone Number_			
		Observer	/ Di	ate
Clinical Objectives				
1) Tour an Emergency Room			_/	
Demonstrate patient assessment and obtain and record at least one s				
vital signs in an Emergency Room. Vital signs include blood pr	essure,			
pulse, respirations, temperature.				
3) The following can be completed under supervision when the opportuni	ity			
presents itself.	•			
A) Obtain and record neurological signs (level of consciousness	S .			
pupil reaction to light, grip).	-7		1	
B) Observe an intravenous line being started and see how it is	***************************************			
secured in place.			1	
C) Observe the administration of an injection.				
D) Administer oxygen to a patient.			-';	
E) Accompany a patient to a specific procedure (example: x-ray	•			
	1		,	
physical therapy, etc.)	***			
F	·			
Emergency Room			,	
A) Observe the unloading procedure of a patient from an ambul	ance.		<u></u> ;	
B) Observe the care given to a patient with chest pain.			_!	
 C) Observe and participate in the cleansing and bandaging of w 	ounds			
D) Observe and participate in the application of a cast.	<u> </u>		_/	
E) Observe and participate in techniques used in transferring a	patient			
from an ambulance cot to an Emergency Room cart.			_/	
F) Accompany an Emergency Room staff member in transporti	ng			
a patient to his room for admission to the hospital.				
 G) Observe the care given to a patient in one of the following ty 	pes			
of shock: hypovolemic, respiratory, cardiogenic, psych	nogenic,			
neurogenic, metabolic, septic.	_		1	
H) Interact with a patient brought to the Emergency Room, and		•		
with friends and relatives of the patient. Observe their				
behavior in the situation.			1	
I) Observe patient history taking techniques in an Emergency R	oom by			
Registered Nurse two times. Follow through by taking the second sec	ing			
a history	9		1	
Third time under supervision.				
J) Observe and participate in the proper technique of physical	-			
assessment.			1	
assessment.	-		'	
Verification of the Course Director				
1		tan al milioto - 1 t		~ *
I certify that the student identified at the top of this form has cor				=IVI
B students in hospital settings, has observed/demonstrated the listed obj	ectives wheneve	r reasible, a	nd has	
completed patient simulation exercises to satisfy objectives not attainable	e during designat	ed clinical tir	ne.	
		·····		
Signature of Course Director	Date			

Emergency Medical Technician Program Southwestern Oregon Community College

Objectives for EMT-B Student Ambulance Experience

The objectives listed below are to be carried out under supervision and in accordance with established agreements with ambulance service providers. Students should observe and demonstrate, whenever possible, each objective identified. The students' instructor or assigned preceptor should initial and date each objective attained. In situations where objectives are not attainable within allotted time, simulations or other activities may be used to insure student competency. The goal for student ambulance experience is for students to observe/participate in 5 ambulance runs and to practice skills associated with maintaining and operating ambulances and EMS equipment.

Name of EMT-B Student_		
Ambulance Service	Phone Number	
Course Director	Phone Number	
Ambulance Ride Time (each type run should be indicated).	of ambulance run, activities in which the stude	ent participated, and the date of the
Type of Run	Student-Involved Activities	Observer Date
2)		
3)		
5)		
 Tour facilities of an ambulance Observe driving techniques use Demonstrate proper techniques Observe activities and conduct scene of an EMS incident Observe proper completion of run reports. Conduct an inspection of an am 	d in responding to an emergency call. in use of a radio and in the conduct of a call. of providers of emergency services at the	Observer / Date
checkoff form. 7) Conduct an inventory of equipm	pont in an ambulance unit	
	lance unit and in preparing the unit for	
Verification of the Course Direct	tor	
B students in ambulance settings,	dentified at the top of this form has completed has observed or demonstrated the listed objectives not attainable during	ctives whenever feasible, and has
Signature of Course Dire	ctor	Date

Southwestern Oregon Community College Follow-Up Evaluation for First Responder, EMT-Basic and EMT-Intermediate Students

The College is interested in obtaining information from previous EMT students to ensure that our EMT program fulfills our students needs. Would you please take a few moments to answer the following questions.

Current Job Status:
How are you currently utilizing your EMT-Basic/Intermediate certification?
Volunteer Agency: Paid Professional:
Do you plan to further your education in the field of Emergency Medical Services?
Yes: No:
If yes what are your future plans?
Do you feel that the instruction that you had at Southwestern provided you with the necessary skill enable you to take the National/State written examination?
Yes: No:
How do you think instruction could have been improved?
Yes.
Yes: No: How do you think instruction could have been improved?
How do you think instruction could have been improved? Do you feel that the instruction that you had provided you with the access a little to
How do you think instruction could have been improved? Do you feel that the instruction that you had provided you with the necessary skills to practice as ar EMT in the capacity that you fill now?
How do you think instruction could have been improved? Do you feel that the instruction that you had provided you with the necessary skills to practice as an EMT in the capacity that you fill now? Yes: No:

Please return this questionnaire to:

Robbie Kirch, Public Safety Training and Education Department, 1988 Newmark, Coos Bay, Oregon 97420.

Southwestern Oregon Community College EMT Program: Student Clinical/Field Evaluation

In order to ensure that our EMT program provides the very best training, the college is interested in obtaining information about our student's performance during their clinical observation and ambulance time. After the student has completed their time with your agency, please take a few moments to answer the following questions. Return this form to: Robbie Kirch, SWOCC, 1988 Newmark, Coos Bay OR 97420.

Did the student arrive on time?
Do you feel this student was prepared for their field time?
Was this student professional in their behavior while they were at your site?
Was this student dressed appropriately?
Was this student cooperative and willing to do as directed?
Did this student appear to be interested in the activities of the organization?
Did this student voluntarily apply themselves to help where able?
Did this student listen to instructions and act accordingly?
Do you have additional comments regarding the student?
Student Name:Date:
Clinical/Ambulance Name:
Evaluated By (Optional)

SOUTHWESTERN OREGON COMMUNITY COLLEGE Registration Form

		YEAR		TERM:	_	MER 🗀	FALL		WINTE	R 🗆	SP	RING []					
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WEEKLY CLASS SCHEDULE

NAME	÷		ID#		TERM:		
PLEASE	NOTE: There are 10 n	ninutes between classes to	allow for students to make	room changes.			
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ACADEMIC PLANNING SHEET

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Fall 20	CR	Winter 20	CR	Spring 20	CR
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Fall 20	CR	Winter 20	CR	Spring 20	CR
EMT Student Handbook					

August 2001
It is the responsibility of students to check with the college or university to which they wish to transfer for all requirements.

Transfer Institution

CWE 12 5/99 pki

S 2 Summer Summer Summer DEGREE/CERTIFICATE: CR S CR Spring Spring Spring CR CR C_R SOC. SEC. #: Winter Winter Winter CR CR 2 NAME: Fall Fall Fall

this plan and changes that I may initiate. I understand that I must review and/or amend my EDP with my advisor if I change my major and/or am within 45 credits of a degree or 20 credits for a certificate of graduation. It is strongly recommended that I check with my advisor at any time to discuss my progress. I, the student, understand this is a provisional plan for the above stated degree/certificate as suggested by my advisor and is subject to change. I take responsibility for Student Signature:

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Pink Copy - Student

Advisor Signature:

edc_dev.frm 08/99

Date:

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ICIAL AID STUDENTS. All changes that are not part of your educational development plan must be reported to the Financial Aid Office. Any change in you ment status (number of eligible credits for financial aid) must be reported to the Financial Aid Office. Fallure to report these changes may result in a delay of alignment.

NO TO ATTEND CLASS DOES NOT CONSTITUTE WITHDRAWAL. TO BE ELIGIBLE FOR A REFUND, STUDENT MUST FORMALLY WITHDRAW DURING REFUND PERIOD

THWESTERN OREGON COMMUNITY COLLEGE, COOS BAY OR 97420-2912 541-888-2525

A non-discriminatory, equal opportunity colle

E.440 (

DATA CHANGE FORM

Legal Name	Phone
*Social Security Number	
OLD ADDRESS/NAME:	NEW ADDRESS/NAME:
SignatureCHANGE OF NAMECHANGE OF ADDRESSCHANGE OF SOCIAL SECURITY NUMBERCHANGE OF BIRTHDATECHANGE OF PHONERevised: 7/00:II:2ptncr	For Office Use Only! ID No. Dept. Receiving Change: Date Processed:

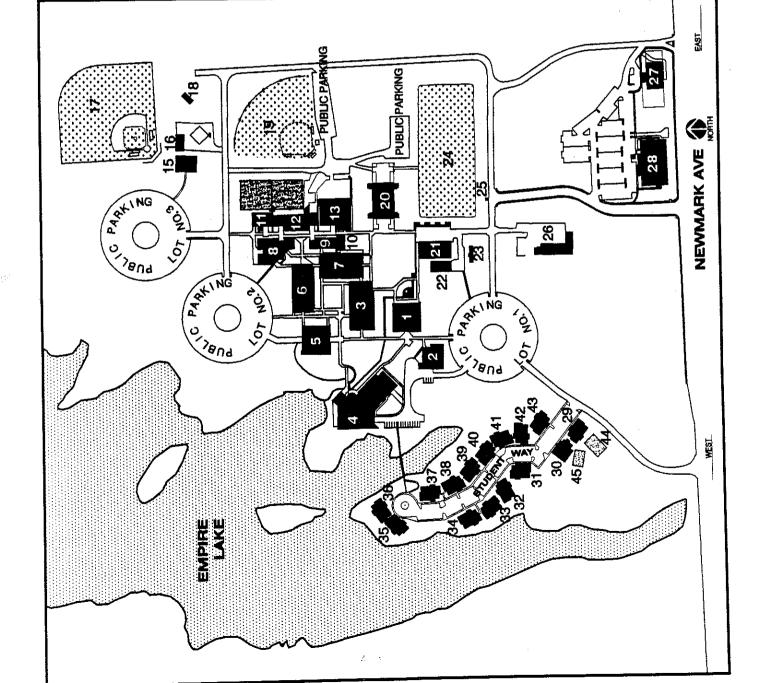
SOUTHWESTERN OREGON COMMUNITY COLLEGE ACADEMIC STANDARDS COMMITTEE OFFICIAL STUDENT PETITION

NI: STUDENT			
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state clearly what you are petitioning for: (Rein	statement Overl	oad Substitution, Wa	iver)
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explain why you believe this petition should be	approved (Attac	h additional pages if n	eeded):
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ON II: RECOMMENDATIONS			
OR: (Required on all petitions)		Yes	No
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SION DIRECTOR: (Required on all petitions except over a director of your program area. On AS/AAOT degrees,	rloads and reinstater	nents. On AAS degrees and division director of the sub-	oject area.)
a director of your program area. On AS/AAO1 degrees,	tedance signarme or	Yes	No
on Director's Signature		Recomme	end Approval
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on for your recommendation for approval or de	eniai:		<u></u>
n this completed petition to the Registrar's Office in I	Dellwood Hall, Rooi	n 4. You will be notified	in writing of the Committee's

SECTION III: REGISTRAR		
Explanation of Action Taken:		
	/ Today's Date	• :
Signature of Registrar	Today's Date	
SECTION IV: ACADEMIC STANDARDS COMMITTEE		
Explanation of Action Taken:		- 1 - 1 - 3
		:
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	1	
Signature of Committee Chairperson	Today's Date	
Additional Comments:		

SOUTHWESTERN OREGON COMMUNITY

1. DELLWOOD HALL 23. OFFICES 2. STENSLAND 24. SOCCER FIELD 3. RANDOLPH HALL 25. GUARD SHACK 4. EMPIRE HALL 25. GUARD SHACK 5. TIOGA HALL 26. PLANT SERVICES / MAIN 6. STTKUM HALL 29. NORTH HEAD 7. COALEDO HALL 29. NORTH HEAD 10. B-2 30. CIGHTHOUSE DEPOT 8. EDEN HALL 30. LIGHTHOUSE DEPOT 10. B-2 33. COQUILLE RIVER 11. SUMNET HALL 32. CAPE BLANCO 12. SUMNER HALL 35. UMPQUA RIVER 13. FAIRVIEW HALL 35. UMPQUA RIVER 14. TENNIS COURTS 37. YAQUINA HEAD 15. FIELD HOUSE 39. TILLAMOOK ROCK 17. BASEBALL FIELD 40. POINT ADAMS 19. SOFTBALL FIELD 40. POINT ADAMS 19. SOFTBALL FIELD 42. WARRIOR ROCK 20. PROSPER HALL 43. WILLAMETTE RIVER 21. UMPQUA HALL 44. VOLLEYBALL COURT 22. B-3 STORAGE 45. BASKETBALL COURT



DIRECTORY

SOUTHWESTERN OREGON COMMUNITY COLLEGE 2003-2004 ACADEMIC CALENDAR

SUMMER TERM 2003 (8 weeks)

May 15 - 21 Advising by appointment in faculty offices
May 19 - 30 Registration
May 22 - June 13 Advising
May 26 CAMPUS CLOSED - MEMORIAL DAY
June 2 - 20 Open Registration
June 16 Fin. Aid/Agency summer book sales begin
June 16. Fin. Aid/Agency summer book sales begin June 20. Last day to register for on-line classes:
June 21 Move-In Day for housing residents
June 23 Day and night classes begin
June 23 - 25 Late registration for summer term
June 25 Last day to register or add classes without
instructor consent
July 1 Last day for refunds
July 2 Last day to return textbooks for full refund
July 2 Fin. Aid students should complete all
add/drops, including waiting list classes,
for correct check disbursement
July 3, 4 CAMPUS CLOSED - INDEPENDENCE
DAY
July 9 Fin. Aid students must complete the
registration process by today (funds
disbursed based on today's enrollment
status)
July 10, 11 Fin. Aid disbursement checks mailed
July 18 GRADUATION APPLICATIONS DUE
August 1 Last day to change to audit without instructor
consent
August 6 Last day to withdraw without instructor consent
August 6 Last day to process summer registrations and
add/drops
August 11-15 Textbook buy-back
August 14 Fall payment deadline
August 15 Last day of classes
August 16 Check-Out Day for housing residents
August 16 Term Break
September 21

Note: Academic calendar subject to change. Please check the Schedule of Classes each term for registration information.

The campus will be closed on Fridays during the summer beginning June 20^{th} through August 29^{th} .

On-line registration cut-off dates are set by the Oregon Community College Distance Learning (OCCDL) and are subject to change.

FALL TERM 2003 (11 weeks)

September 1 CAMPUS CLOSED - LABOR DAY
September 12 Faculty return to campus
September 12 Advising appointment schedules distributed to faculty
September 12-19 IN-SERVICE (campus may be closed)
September 15 Fin. Aid/Agency fall book sales begin
September 15-19 Follow up registration for fall
September 16 Move-In Day for housing residents
September 17-19 Advising by appointment in faculty offices
September 17-19 New Student Orientation
September 19 Last day to register for on-line classes
September 22 Day and night classes begin
September 22-26 Late registration for fall term
September 26 Last day to register or add classes without
instructor consent
October 3 Last day for refunds
October 3 Last day to return textbooks for full refund October 3 Fin. Aid students should complete all
add/drops, including waiting list classes,
for correct check disbursement
October 8 Fin. Aid students must complete the
registration process by today (funds
disbursed based on today's enrollment
status)
October 9, 10 Fin. Aid disbursement checks mailed
October 27 Begin making advising appointments for
winter registration on sign-up sheets
on faculty doors
October 31 Last day to change to audit without instructor
consent
November 10-14 Advising by appointment in faculty offices
November 11 CAMPUS CLOSED - VETERAN'S DAY
November 12 Advising
December 12
November 14 GRADUATION APPLICATIONS DUE
November 17 Registration for winter term begins
November 17 Make payment arrangements with Student First
Stop Center at time of registration November 26 Last day to withdraw without instructor consent
November 26 Last day to withdraw without historical Consent November 26 Last day to process fall registrations and
add/drops
November 27,28 CAMPUS CLOSED - THANKSGIVING
December 1 Begin making advising appointments for
late winter registration on sign-up
sheets on faculty doors
December 1-4 Final exam week (M-Th)
December 2 Southwestern Foundation General Scholarship
Applications available for 2003-2004
December 3-5 Textbook buy-back
December 6 Last day to check out of Student Housing
December 6 Term Break January 4
December 24,25 CAMPUS CLOSED - CHRISTMAS
December 24,22 Chia Co Choole - Canada I

WINTER TERM 2004 (11 weeks)

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December 29	Fin. Aid/Agency winter book sales begin
	CAMPITE OF OSKID - NEW YEARS
January 2	Faculty return to campus Last day to register for on-line classes
January 2	Last day to register for on-line classes
Tomas PU 7	MEM Planting transport transport to any
t 7	Advicing and revisuation
Taman = 2	New Shident Orientation 1:30 pm
Tomuseu 4	Housing open for returning residents
Tanuary 5	Day and night classes begin
Tomport 5-0	Late registration for winter term
January 9	Last day to register or add classes without
	instructor consent
January 16	Last day for refunds
January 16	Last day to return textbooks for full refund
January 16	Fin. Aid students should complete all
	add/drops, including waiting list classes,
	for correct check disbursement
January 19	. CAMPUS CLOSED - DR. MARTIN
	LUTHER KING, JR. DAY
January 21	. Fin. Aid students must complete the registration process by today (funds
	disbursed based on today's enrollment
	status)
January 22, 23	. Fin. Aid disbursement checks mailed
February 2	. Begin making advising appointments for spring registration on sign-up sheets
	on faculty doors
	Last date to change to audit without instructor
February 13	consent
m. 46	CAMPUS CLOSED - PRESIDENT'S DAY
February 10	Advising by appointment in faculty offices
February 10-24	GRADUATION APPLICATIONS DUE
T. L	Degistration for spring term Degins
February 23	Make payment arrangements with Suitem Pilst
reditiary 25	Stop Center at time of registration
February 25	
3.4 to 20	
March 1	Southwestern Foundation General Scholarship
	Application deadline for 2003-2004
March 8	Regin making advising appointments for
Maior o	late spring registration on sign-up
	sheets on faculty doors
March 10	Last day to withdraw without instructor consent
March 10	Last day to process winter registrations and
	add/drops
March 15-18	Final exam week (exams M-Th)
3 famel 17 10	Textbook huv-back
March 20	Check-Out Day for nousing residents not
	returning spring term
March 21-28	Spring/term break

SPRING TERM 2004 (11 weeks)

March 22	Fin. Aid/Agency spring book sales begin
March 26	Housing Move-In Day
March 26	Housing Move-In Day Last day to register for on-line classes
March 29	Faculty return to campus
March 29	Day and night classes begin
Morch 20 - At	nril 2 Late registration for spring term
April 2	Last day to register or add classes without instructor consent
April 9	Last day for refunds
April 9	Last day to return textbooks for full return
April 9	Fin. Aid saidents should complete all
_	add/drops, including waiting list classes, in correct check disbursement
April 14	Fin. Aid students must complete the
	registration process by today (funds disput
	based on today's enrollment status)
April 15,16	Fin. Aid disbursement checks mailed
April 27	Begin making advising appointments for
•	summer and fall registration on
	sign-up sheets on faculty doors
April 30	GRADUATION APPLICATIONS DUE
May 7	I ast day to change to audit without instructor cons
May 10-14	Advising by appointment in faculty offices
3.5 17	Degistration for summer and fall terms organs
May 17	Make navment arrangements with Student Pile
Stop	Center at time of registration
May 18-June	12 Advising
May 31	CAMPUS CLOSED - MEMORIAL DAY
June 2	Last day to withdraw without instructor consent
	Last day to process spring registrations and add/drops
June 7-10	Final exam week (exams M-Th)
June 9-11	Textbook buy-back
Tune 11	Commencement
June 12	
June 12-20	Term break

Note: Academic calendar subject to change. Please check the schedule of classes each term for registration information.

On-line registration cut-off dates are set by the Oregon Community College Distance Learning (OCCDL) and are subject to change.

Revised 06/24/03 kr



Southwestern Oregon Community College Library Coos Bay, Oregon 97420

General Library User's Guide

The purpose of SOCC library is to assist in fulfilling the college's mission of providing quality education that helps students achieve their goals. It primarily exists to aid students in their educational goals, faculty in their instructional and professional development goals, and community members in their life enrichment pursuits. To accomplish this, the library will do the following:

- Maintain a balanced and organized collection of high quality materials and professional assistance to all its users.
- Provide access to information located elsewhere.
- Deliver education and training in developing information-gathering skills including accessing, evaluating and using various information sources.
- Promote technological competence by providing access to information available in electronic formats, including CD-ROM databases and online resources via the Internet.
- Cooperate with other organizations for the advancement of scholarship and college goals.
- Support the cultural awareness of students and the community at large.

Library Hours

Sunday	
Monday - Thursday	8am - 9pm
Friday	8am - 5pm
Saturday	

Hours vary during summer and when school is not in session.

Telephone/Fax Numbers (Area Code 541)

Audiovisual Materials	888-7268
Circulation (main floor)	888-7270
Circulation (upper floor)	888-7268
Course Reserve	888-7262
Fax	888-7605
Interlibrary Loan.	888-7270
Periodicals	. 888-7268
Reference 888-7270	or 888-7448

Please ask the library staff for assistance.

Services

- ★ Circulation: The library lends books, audio and video cassettes, CDs, slides, and maps. Periodicals newer than five years are checked out for two hours. Reference books, periodicals older than five years, and some course reserve materials are for use in the library only. See Circulation Policies.
- ★ Distance Learning: Many library services and electronic databases are available online to the currently enrolled SOCC distance learning student, whether the student is on or off campus. To access services and databases available, go to the library's web page http://www.socc.edu/library.
- ★ Hold Requests: When an item is not immediately available because it is already checked out, or held by another COASTLINE library, a patron may reserve the item by placing a "hold request". When there are several requests for the same item, requests are processed in the order received.
 - Currently enrolled students, current faculty, and staff of the SOCC college community in Coos and Curry counties may submit hold requests via the library's web page http://www.socc.edu/library/holdrequest.html>.
 - Other patrons may submit hold requests in person or by phone.
- ★ Interlibrary Loan: When an item needed by a patron is not available from a COASTLINE library, the library will request books/media and periodical articles from other libraries across the country.
 - Currently enrolled students, current faculty, and staff of the SOCC college community in Coos and Curry counties may submit ILL requests via the library's web page http://www.socc.edu/library/illoan.html.
 - Other patrons must fill out a paper request form at any COASTLINE library.
- ★ Library Instruction: The library staff is committed to helping users gain knowledge about library services and library research systems while developing information literacy and critical thinking skills. This is accomplished by providing individual assistance, group orientations, and a self-paced course, LIB127 Introduction to the Library.
- ★ Photocopy: A photocopier is available on both the main and upper floors of the library. Copy control cards available at the circulation desk on each floor activate them. Compliance with current copyright law is the responsibility of the user.
- Copies from microfilms are also available on the upper floor of the library and cost 25 cents per copy.
- * Reference: Professional librarians and staff are available during library hours to assist patrons in accessing a variety of print, non-print, and electronic information resources.
 - Short, factual or statistical questions may be submitted in person or by phone. Currently enrolled students, current faculty, and staff of the SOCC college community in Coos and Curry counties may also submit questions via the library's web page http://www.socc.edu/library/reference.html>.
 - Longer research questions are best answered by coming to the library and consulting with a librarian or staff person.
- ★ Web Page: The library's web page is located at http://www.socc.edu/library and provides links to various library services and electronic resources.

COASTLINE: The COASTLINE Online Public Access Catalog (OPAC) lists books, media, and selected periodicals owned by SOCC, the Coos County public libraries, and the Myrtle Point school district libraries. It can be searched by subject, title, author, words in the title, and/or call number. COASTLINE is also available via the library's web page http://www.socc.edu/library.

COASTLINE library cards are issued free of charge with current I.D. and address verification at participating Coos County libraries. The card holder is responsible for all materials checked out on their patron library card. Please report lost or stolen cards to the library immediately, so a block can be placed on your account. There is a \$1.00 charge for replacement cards.

Circulation Policies

All of SOCC library materials and computers are available to anyone for in-library use. Students, faculty, staff, residents of the college district, or anyone issued a COASTLINE library card may check out materials from the library. There is a system-wide checkout limit of 50 items.

• Loan Periods:

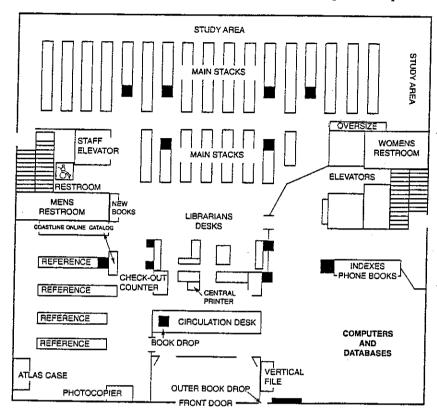
Audiocassettes/Slides	3 weeks
Books	
CDs	1 week
Course Reserve Materials	
Interlibrary Loan Materials	Varies
Maps	3 weeks
Periodicals (newer than five years)	2-hour Library Use Only
Periodicals (older than five years)	Library Use Only
Reference Materials	Library Use Only
Vertical File	Honor System
Videocassettes	3 days

- Renewals: Circulating materials may be renewed twice in person or by phone through any COASTLINE library provided a hold request has not been placed on the item. Course reserve materials, newspapers, magazines, and interlibrary loans must be renewed through the SOCC library.
- Return of Materials: General circulation materials may be returned to any COASTLINE library. Course reserve materials, newspapers, magazines, and interlibrary loans must be returned to the SOCC library.
- Overdue Materials/Fines: When materials are overdue, borrowers will be sent only one notice requesting their return. If the materials are not returned or renewed, a bill will be issued for the replacement cost of the items, plus processing charges.

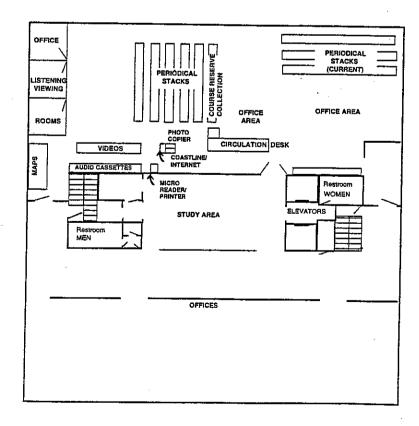
Audiocassettes/Slides	\$0.10/day
Books	\$0.10/day
CDs	\$1.00/day
Course Reserve Materials:	
Hourly check-out	\$.50/hour
Daily check-out	\$2.00/day
Weekly check-out	\$1.00/day
Interlibrary Loan Materials	\$.50/day
Periodicals	\$.50/hour
Videocassettes	\$1.00/day

• Damaged/Lost Materials: The borrower is responsible for damaged or lost materials, and is billed accordingly.

The main floor of the library is located on the second floor of Tioga. The circulating books, reference collection (including print and electronic periodical indexes), the vertical file, and computers for public use are located here.



The upper floor of the library is located on the third floor of Tioga. The periodicals, audiovisual materials, maps, and course reserve collection are located here.



Appendix P

SOUTHWESTERN OREGON COMMUNITY COLLEGE

2003-2004 EMERGENCY MEDICAL TECHNICIAN PROGRAM ADVISORY COMMITTEE

Mike Eck, EMT-P Bay Cities Ambulance, SOCC 3505 SE Ocean Blvd Coos Bay OR 97420

Barbara Gabert, M.D. Bay Area Hospital 1775 Thompson Road Coos Bay OR 97420

Peggy Goergen, Associate Dean SOCC - Curry County 420 Alder Street Brookings OR 97415

Kathleen Homstuen, EMT-B Millington Fire Department 10335 Cape Arago Highway Coos Bay OR 97420

Dan Crutchfield, EMT-I Coos Bay Fire & Rescue/SOCC 94250 20th Lane Coos Bay OR 97420

Cheryl Houston, EMT-P Myrtle Point Ambulance 414 5th Myrtle Point OR 97458

Terry Mendez, EMT-P Bay Cities Ambulance/SOCC 3505 SE Ocean Blvd Coos Bay OR 97420

Mark Pasternak, M.D. Coquille Valley Hospital 90158 Cape Arago Highway Coos Bay OR 97420 Shawn March, EMT-P Coquille Fire & Rescue 3rd & Alder Coquille OR 97423

Fred Siewert, EMT-P Lower Umpqua EMS 600 Ranch Road Reedsport OR 97467

Rick Cooper, EMT-B North Bend Fire & Rescue 1880 McPherson North Bend OR 97459

Jerry Huff, EMT-I Bay Cities Ambulance/SOCC 3505 SE Ocean Blvd Coos Bay OR 97420

Bruce Latta Bay Cities Ambulance 3505 SE Ocean Blvd Coos Bay OR 97420

Jim Aldrich Bay Area Hospital 1775 Thompson Coos Bay OR 97420

Randi Durham, First Responder SOCC EMT Student 2674 Liberty North Bend OR 97420

Rotary

Appendix Q

A.

SOUTHWESTERN OREGON COMMUNITY COLLEGE EMERGENCY MEDICAL SERVICES ADVISORY COMMITTEE MINUTES

Date: February 12, 2004

Location: Southwestern Oregon Community College, Stensland Hall, Room 205

Meeting was called to order by Kirch at 2:06pm

Present:

Kathy Homstuen, Millington Fire Robbie Kirch, Southwestern Barbara Gabert, M.D., Bay Area Hospital Jim Aldrich, Bay Area Hospital Mark Pasternak, M.D., Coquille Valley Hospital Randi Durham, Student Representative Paul Reynolds, Southwestern

Introduction of the present committee members.

Minutes from the meeting held October 2, 2003 were reviewed.

The status of the current classes that we are offering:

- EMT-Intermediate at Reedsport, Fred Siewert and Ed Palmer, Instructors. Enrollment of 14.
- EMT-Intermediate in Curry County, Ken Wood, Instructor. Enrollment of 7.
- EMT-Intermediate in Port Orford, Miriam Brown, Instructor. Enrollment of 3.
- EMT-Basic on Main Campus, Huff and Crutchfield, Instructors. Enrollment of 30.
- EMT-Basic in Coquille, Wildman and Conley, Instructors. Enrollment of 23.
- EMT-Basic in Port Orford, Huff, Instructor. Enrollment of 8.
- Emergency Communications/Patient Transport, Eck, Instructor. Enrollment of 9.

We generally do not have so many classes at the same time or with the number of students enrolled. We were given grant funding through Northeast Oregon AHEC for several of the above classes. This funding will no longer exist for rural EMT training so many of the departments took this opportunity of getting their volunteers trained using this funding.

Continuing education ideas were discussed. The various agencies in the district have new training schedules available. Interested persons can contact Bay Area Hospital and Bay Cities Ambulance. Homstuen mentioned the state Mobile Training Unit is also coming into the area soon and suggested that any interested agency could contact Donna Wilson for further information.

First Responder re-certification comes up on June 30, 2004. Kirch has sent out packets to the training officers of the district agencies with information on continued education requirements. SOCC is offering a Initial First Responder class during the Spring term and will send out the class schedule to agencies and also to individuals who are certified but are not with a department.

Training equipment that will be purchased through the EMT budget was briefly discussed. Reynolds informed the committee of the program goal of creating a training "tent/trailer" that would be supplied with all equipment for an off campus class for both an EMT-Basic and EMT-Intermediate class. This would then be signed out by the instructor and taken for the length of the class and returned. Members present wholly supported this goal.

The upcoming accreditation visit was discussed. Kirch is putting finishing touches on the self-study that will be sent to the Dept of Education for them to distribute to the accreditation committee. A schedule of their visit will be distributed at the first of March. The visit is to happen on March 29, 30, 31. The first two days are the actual time they will spend reviewing our program and the last day they will present their report. On March 29th they would like to meet with the Advisory Committee at lunch. This lunch will be held in the Performing Arts Center at noon.

The situation that was created by letting a non-certified student "sit-in" on a class during Fall term was discussed.

Durham suggested that the program look into getting an ambulance donated to the college. Reynolds informed her that we had been offered one by Bay Cities and Charleston Rural Fire. Unfortunately both vehicles required automotive work. Not only do we not have the budget to pay for repair or replacement of vehicle parts, we also do not have anywhere to house a vehicle. We are continuing to strive toward a building for both the Fire Science and EMT programs.

Meeting adjourned at 2:45pm. Next meeting is scheduled for Thursday, March 18, 2004 at 2:00pm in Stensland Hall, Room 205.

Respectively submitted this 13th day of February, 2004

Robbie Kirch **Public Safety Training and Education Department** EMT Program

SOUTHWESTERN OREGON COMMUNITY COLLEGE EMERGENCY MEDICAL SERVICES ADVISORY COMMITTEE MINUTES

Date: October 2, 2003

Location: Southwestern Oregon Community College, Stensland Hall, Room 205

Meeting was called to order by Kirch at 2:00pm

Present:

Kathy Homstuen, Millington Fire Robbie Kirch, Southwestern Rick Cooper, North Bend Fire & Rescue Joanna Blount, Southwestern Paul Reynolds, Southwestern

Minutes from the meeting held June 26, 2003 were reviewed.

A discussion involving the EMT-Basic written test scores took place. Kirch contacted the state asking about other programs and their scores results also what books the other programs were using. Gillen stated that poor written exam results were all over the state and there wasn't any particular pattern or book use. Another factor discussed was the maturity level of the students. It appeared that the older students where the ones that more frequently passed the written test. The instructors were notified and are now examining the Brady text to see if it is more comprehensive. National will be contacted for their current pre-test and students who will be re-testing will be encouraged to take this exam prior to testing. This pre-test will also be given in future classes.

New members for the advisory committee for the year 2003~2004 will be contacted. Kirch will contact Suzy McDaniel at Bay Area Hospital to find out who she feels would be an appropriate representative for them. Terry Mendez will be contacted to represent a graduate of the EMT certificate program and a current student in the certificate program will be asked to participate.

The status of the current classes that we are offering:

EMT-Intermediate at Reedsport, Fred Siewert and Ed Palmer, Instructors. Northeast Oregon AHEC awarded us grant funding to pay for the instruction of this class. Total enrollment is 13 with 7 of the students being funded by NEOAHEC.

EMT-Intermediate in Curry County, Ken Wood and Kathy Ottenbrett, Instructors. Total enrollment is 7 with

a possibility of one dropping the class due to work conflict.

First Responder, Terry Mendez, Instructor. Total enrollment is 22 students.

Intro to EMS, Mike Eck, Instructor. Total enrollment is 12 students.

The EMT-Basic class is projected to be a large class this year. Several departments have put in for NEOAHEC funding for their volunteers. Siuslaw has asked for 10, North Bend - 2, Charleston - 5, and Lakeside - 4. This does not include the regular students that we have in the program. We have upped the amount of students that will be allowed to take this class to 36 and will provide the necessary lab instructors to ensure proper instruction.

Port Orford Ambulance has applied for grant funding to pay for an EMT-Basic class. Kirch is trying to obtain instructors who would be willing to teach in Port Orford. The have 10 students interested in taking the class. They have also contacted Mike Eck and asked if he would be willing to teach an EMT-Intermediate class to three individuals there and would be funding that through their ambulance board funds.

Continuing education ideas were discussed. Hornstuen suggested a "Carbusters" training but it was felt that Southwestern Oregon Fire Instructors Association should be contacted to put that type of training on. First Responder re-certification comes up on June 30, 2004 and Hornstuen suggested sending out the notification packets along with the current First Responder class schedule to agencies for their individual First Responders to attend class sessions to obtain their necessary continuing education hours.

Training equipment that will be purchased through the EMT budget was briefly discussed. A copy of what will be ordered this year is available by contacting Kirch. Also mentioned was the two adult full body and four junior manikins that are being requested for purchasing through "Perkins" grant.

Kirch is currently working on the EMT program accreditation self-study report. The initial draft will be on Reynold's desk by October 13 for his review and revisions.

Reynolds presented the T-shirt that was designed for our EMT/Fire Science students. This shirt will be required for them to wear during their field time. The members present were pleased with the final result. This shirt will be available for purchase through the bookstore.

Janet McCllellan, former Criminal Justice faculty, has left Southwestern for a teaching position back east. At this time Reynolds has been asked to help with the advising for students that are in that program. It was also discussed that there might be a restructuring of his position to include overseeing the future CJ faculty. There has only been an initial conversation in this regard and more discussion will follow.

Cooper suggested compiling a list of "where are they now" of graduate students from both Fire Science and EMT programs.

Sumner 12 has been given to the EMT/Fire Science programs as a "semi-dedicated" classroom. All EMT equipment has been moved into this room and is stored in locked cabinets. This is a great advancement for both programs.

Meeting adjourned at 2:55pm. Next meeting is scheduled for Thursday, February 12, 2004 at 2:00pm in Stensland Hall, Room 205.

Respectively submitted this and day of October, 2003

Public Safety Training and Education Department

EMT Program

SOUTHWESTERN OREGON COMMUNITY COLLEGE EMERGENCY MEDICAL SERVICES ADVISORY COMMITTEE MINUTES

Date: June 26, 2003

Location: Southwestern Oregon Community College, Stensland Hall, Room 205

Meeting was called to order by Kirch at approximately 2:05pm

Present:

Cheryl Houston, Myrtle Point Ambulance Kathy Hornstuen, Millington Fire Jerry Huff, Bay Cities/Southwestern Dave MacManiman, Charleston Fire Robbie Kirch, Southwestern Fred Siewert, Lower Umpqua EMS/Southwestern Joanna Blount, Southwestern

Paul Reynolds, Southwestern

Minutes from the meeting held April 17, 2003 were reviewed.

Kirch gave an update on the Winter/Spring term completed classes:

- EMT-Basic, Jerry Huff & Dan Crutchfield Instructors, enrollment of 20, 20 passed practical
- First Responder @ Myrtle Point, Cheryl Houston Instructor, enrollment of 16, 10 passed
- First Responder @ Charleston, Don Manley Instructor, enrollment of 20, 18 passed

Through the "Perkins" grant funding we were able to obtain equipment for continued outreach classes held at Myrtle Point Ambulance. This included a Intra osseous Infusion Simulator, Combitube Trainer, Nebulizers, and a Veni Puncture Training arm w/replacement.

We are planning to apply for a grant with Northeast Oregon AHEC to provide funding for an EMT-Intermediate class to be held in Reedsport beginning Fall term. Fred Siewert has agreed to be course director.

We have been officially notified that the EMT program accreditation will take place during the Spring of 2004. More work will take place in the upcoming months to prepare for this visit.

Discussion on an Emergency Driver Training class for EMT students took place. Reynolds would like to insure that the course we offer would be accepted by agencies throughout the state. Siewert informed the group that Lower Umpqua EMS has the DHS Mobile Training Unit provide them with their training. They are then issued a certificate from the state. Reynolds and Kirch will contact Donna Wilson for further information. We are planning on offering the first course during the 2004~2005 school year.

Reynolds asked the members present if they felt that we needed to add a "stand alone" safety course. This class would be a 30-40 hour class covered over one term. It would be a more in-depth study of safety issues/concerns then what is presented in the EMT curriculum right now. The members present felt that it would be a good idea to include this type of training for EMT students.

Reynolds presented several sketches of a patch for either a silkscreen or embroidered shirt for our EMT/Fire Science students. This shirt would be required for them to wear during their field time. The members present were very much in favor of a shirt that identified our students. A proposed patch will be sent to the appropriate deans for final approval.

A discussion regarding the college's EMT equipment took place. Several items including mannequins and AED's need to be replaced. Kirch and Mike Eck will be going through the inventory within the next several months will be upgrading many of the existing items.

Meeting adjourned at 2:55pm. Next meeting is scheduled for Thursday, October 2, 2003 at 2:00pm in Stensland Hall. Room 205.

Respectively submitted this 30th day of June, 2003

Robbie Kirch

Public Safety Training and Education Department

EMT Program

Appendix R

25

PUBLIC SCHOOLS Safety Inspection Checklist

Safety Committee has developed this form to assist staff in identifying and when necessary, correcting safety eards.

ards.			
se send completed form to: Carol Ric			
ppleted by: Southwestern Safety Commi	ttee		ne ext.: 7206
e: <u>2/5/05</u> Bu	ilding:	Emp	pire/PAC
neral Work Environment	Yes	No	
Are emergency telephone numbers posted where they can be readily used in case of emergency?			Yellow signs througout bldg need to be revised/replaced
Are first-aid kits easily accessible to each work area, with necessary supplies available, periodically inspected and replenished as needed?			Inventory list needs to be obtained and boxes checked for adequate supply
Are portable fans provided with full guards having openings of ½ inch or less?			
Are spilled materials or liquids			Need to check with Sid Hall re: s.c. minutes, etc.
cleaned up immediately? Are materials stored in a manner to	\boxtimes		
prevent sprain or strain injuries to employees when retrieving the materials?	.		
Are there signs of water leaks or is there water damage (i.e. stained ceiling tiles)?		\boxtimes	
TE: BRACE ON TABLE E	BROI	KEN	N IN GAME ROOM
alkways	Yes	No	
Are walking surfaces kept dry or appropriate means taken to ensure that			Upstairs mat edg4es need to be affixed/have yellow glow tape put on them.
Surfaces are slip-resistant? Are aisles and passageways kept clear and are they at least 22 inches wide?			
Are openings or holes in the floors or other treading surfaces repaired or otherwise made safe?		\boxtimes	Hole in walkway outside lower level entrance to PAC

Safety Inspection Checklist Page 2	Safety Inspection Checklist Page 3
4. Are materials or equipment stored so sharp objects cannot obstruct the walkway? 5. Are changes of direction or elevation readily identifiable? 6. Are aisles or walkways that pass near moving or operating machinery, welding operations or similar	7. Do stairway handrails have at least three inches clearance between handrails and the wall or surface they are mounted on? 8. Do stairways that are greater than 48" wide have handrails on both sides of the stairway?
operations of simulations of simulations of simulations of simulations operations arranged so employees will not be subjected to hazards? 7. Is adequate headroom (of at least 6.5 X X feet) provided for the entire length of any walkway? 8. Are standard guardrails provided wherever aisle or walkway surfaces are elevated more than four feet above any adjacent floor or the ground? 9. Are grates or similar covers over floor openings, such as floor drains, of such design that foot traffic or rolling equipment will not be caught by the grate spacing? NOTE: LINOLEUM LIFTING IN GAME ROOM; ASG OFFICE RUGS; KICKBOARD ON STAIRS	Elevated Surfaces 1. Are signs posted, when appropriate, showing elevated floor loading capacity? 2. Are elevated surfaces (more than four feet above the floor or ground) on which people may walk provided with standard guardrails? 3. Is a permanent means of access/egress provided to elevated work surfaces? 4. Is material on elevated surfaces piled, stacked, or racked in a manner to prevent it from tipping, falling, collapsing, rolling, or spreading?
Stairs and Stairways 1. Are standard stair rails and handrails present on all stairways having four or more risers? 2. Are all stairways at least 22 inches wide? 3. Do stairs have at least 6.5 feet of overhead clearance? 4. Are step risers on stairs uniform from top to bottom, with no riser spacing greater than 9.5 inches? 5. Are steps on stairs and stairways designed or provided with a surface that renders them slip resistant? 6. Are stairway handrails located between 30-42 inches above the leading edge of the stair treads?	Exit or Egress 1. Are all exits marked with an exit sign and illuminated by a reliable light source? 2. Are all exits kept free of obstructions and unlocked? 3. Are at least two means of egress provided from elevated platforms, pits, or rooms where the absence of a second exit would increase the risk of injury from hazardous materials? 4. Are there sufficient exits to permit prompt escape in case of emergency? 5. Are cold-storage rooms provided with an inside release mechanism that will release the latch and open the door even if it is padlocked or otherwise locked on the outside? Second exit would increase the risk of injury from hazardous materials? Ask Sid Hall

14. Is all protective equipment maintained in a sanitary condition and ready for

use?

Safety Inspection Checklist		Page 6	Safety Inspection Checklist		Page 7
 15. Are means provided for quick drenching or flushing of the eyes and body in areas where caustic or corrosive liquids or materials are handled? 16. Eye wash and safety shower operational? (Test) 	Yes N		marked with signs reading "CAUTION – Do Not Use Around Electrical Equipment" or equivalent wording?	:	
Portable Ladders	es No				
- 1 A - 44 A - 4 A		Ladder back stage should be chained to wall	Shops 1. Are compressed air nozzles are	es No	
tight, all hardware and fittings securely attached, and movable parts operating freely without binding or			vented? 2. Are rotating or moving parts of equipment guarded to prevent physical contact?		
undue play? 2. Are nonslip safety feet on all ladders			Grinders		
except step ladders? 3. Are ladder rungs and steps free of	 		3. Are tool rests adjusted to within 1/8 L Inch of wheel?		
grease and oil?			4. Are tongue guards adjusted to within [4. inch of wheel?		
placing ladders on boxes, barrels, or			5. Is eye/face protection available?		
other unstable bases to obtain additional height?			Hand Tools and Equipment 6. Are all tools and equipment (both		
5. Are employees instructed to face the			company and employee owned) in good working condition?		
ladder when ascending/descending? 6. Are employees prohibited from using ladders that are broken, missing steps, rungs or cleats, broken side rails, or					
other faulty equipment? 7. Are employees instructed not to use the top step of ordinary stepladders as			necessary? 8. Are broken or fractured handles on hammers, axes, or similar equipment		
a step? 8. When portable rung ladders are used			replaced promptly? 9. Are appropriate handles used on files		
to gain access to elevated platforms, roofs, and the like, does the ladder			and similar tools?		
always extend at least three feet above the elevated surface?			head of all tools?		

and the control of the child			Page 8
Cranes and Hoists 11. Are cranes visually inspected for defective components prior to the star of any work shift? 12. Is the load capacity clearly visible to the operator?	Yes	s N	
Chemicals	i Haza	unts g	reater than typical office/household quantities, you are
Hazardous Materials1. Original product names (or full chemical names) and hazards clearly identified on labels?	Yes ⊠	No	
2. Containers of non-hazardous substances (e.g. water) labeled explicitly to avoid confusion?			
3. All chemical containers capped and sealed, except when actively adding or removing materials from them?	\boxtimes		
4. Employees have completed hazard communication training?			
5. MSDS and chemical inventory list are readily available, are current, and in good order?			
Hazardous Waste 1. Waste containers are sturdy, routinely inspected for leaks, compatible with the waste, and kept closed (i.e., no funnels left sticking out) using screw	Yes	No	
caps or other tight fitting closure. 2. Containers are labeled with the words "Hazardous Waste" and the full chemical name(s).			

Safety Inspection Checklist

Appendix S

SPECIFIED MEDICAL PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY

INTERSTATE INSURANCE GROUP

CHICAGO INSURANCE COMPANY

Executive Offices: 55 E. Monroe Street Chicago, Illinois 60603

OFFERED THROUGH THE PURCHASING GROUP ASSOCIATION NAMED IN THE DECLARATIONS

CHICAGO INSURANCE COMPANY

(a stock insurance company, herein called the Company)
Executive Offices: 55 E. Monroe Street
Chicago, Illinois

SPECIFIED MEDICAL PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY

The Company agrees with the **Named Insured**, in consideration of the payment of the premium, and in reliance upon the statements in the Declarations and in the application and subject to the limit of liability, exclusions, conditions and other terms of this policy, as follows:

COVERAGES:

A. COVERAGE A. PROFESSIONAL LIABILITY COVERAGE

If indicated by a specific premium on the Declarations Page, the Company will pay on behalf of the **Insured** all sums which the **Insured** shall become legally obligated to pay as **Damages** because of **Bodily Injury**, **Property Damage**, **Personal Injury** to which this insurance applies in the operation of the business or conduct of the profession of the **Named Insured** as specified on the Declarations page, caused by an **Incident** which occurs during the **Policy Period**.

B. COVERAGE B, GENERAL LIABILITY COVERAGE

If indicated by a specific premium on the Declarations Page, the Company will pay on behalf of the **Insured** all sums which the **Insured** shall become legally obligated to pay as **Damages** because of **Bodily Injury**, **Property Damage** or **Advertising Injury** to which this insurance applies in the operation of the business for conduct of the profession of the **Named Insured** as specified on the Declarations page, caused by an **Occurrence** during the **Policy Period**. This coverage specifically includes the following extensions:

Contractual Liability: **Bodily Injury** or **Property Damage** resulting from any **Incidental Contract** relating to the conduct of the **Named Insured**'s business, except if such injury or damage occurred prior to the execution of the **Incidental Contract**;

2. Host Liquor Liability: **Bodily Injury** or **Property Damage** arising out of the giving or serving of alcoholic beverages at functions incidental to the **Named insured**'s business; providing the **Named Insured** is not engaged in the business of manufacturing, distributing, selling or serving of alcoholic beverages;

3. Fire Legal Liability: Property Damage to structures or portions thereof rented to or leased to the Named Insured, including fixtures permanently attached thereto, if such Property Damage arises out of fire. Solely as respects Fire Legal Liability coverage, all the exclusions of the policy, other than Exclusions 6, 12 and 13 and the Nuclear Energy Liability Exclusion (Broad Form) are deleted.

As respects coverage(s) indicated on the Declarations Page, the Company shall have the right and duty to defend any Suit against the Insured seeking Damages on account of such Bodily Injury, Property Damage, Personal Injury or Advertising Injury, even if any of the allegations of the Suit are groundless, false or fraudulent, but the Company shall not be obligated to pay any claim or judgment or continue to defend any Suit after the applicable limit of the Company's liability has been exhausted by payment of judgments or settlements.

The Company, at its option, shall select and assign defense counsel; however, the Named Insured may engage additional counsel, solely at their expense, to associate in their defense of any claim covered hereunder. Claims Expenses incurred by the Company shall be paid in addition to the applicable limits of liability. The Company shall also have the right to investigate any claim and/or negotiate the settlement thereof, as it deems expedient, but the Company shall not commit the Named Insured to any settlement without their written consent. If the Named Insured refuses to consent to any settlement recommended in writing by the Company and elects to contest the claim

or continue any legal proceedings in connection with such claim, then the Company shall be relieved of any further duty to defend the claim, and the liability of the Company for **Damages** and **Claims Expenses** shall not exceed the amount for which the claim could have been settled as well as the **Claims Expenses** incurred by the Company or with the Company's consent up to the date of such refusal. The **Insured** shall not assume any obligations, incurany costs, charges, or expenses or enter into any settlement without the Company's written consent.

- II. PERSONS INSURED: Each of the following is an Insured under this policy to the extent set forth below:
 - A. If the Named Insured is an individual, the Named Insured so designated in the Declarations;
 - B. If the Named Insured is a sole proprietorship, the Named Insured so designated in the Declarations;
 - C. If the **Named Insured** is a partnership, the partnership so designated in the Declarations and any partner thereof;
 - D. If the **Named Insured** is other than an individual, sole proprietorship or partnership, the organization so designated in the Declarations, and any owner, officer, director, trustee or stockholder thereof;
 - E. Any employee of the **Named Insured**, but only while such employee was acting on behalf of the **Named Insured** and within the scope of the employee's duties as such or for acts performed by such employee as a Good Samaritan or unpaid volunteer during the employee's term of employment with the **Named Insured**;
 - F. Any volunteer, but solely while such person was acting within the scope of the volunteer's duties for, and on behalf of, the Named Insured.
- III. LIMITS OF LIABILITY: Regardless of the number of Coverage Parts that apply, the number of Insureds under this insurance, the number of persons and/or organizations who sustain Bodily Injury, Property Damage, Personal Injury and/or Advertising Injury, or the number of claims made or Suits brought, the Company's liability is limited as follows:
 - A. The limit of liability stated in the Declarations as applicable to "each Incident" or "each Occurrence" is the total limit of the Company's liability for all Damages for each Incident and/or Occurrence covered by the policy. All claims arising from the same or related Incident and/or Occurrence shall be considered a single Claim for the purpose of this insurance and shall be subject to the same limit of liability.
 - B. The limit of liability stated in the Declarations as "Aggregate" is, subject to the above provisions involving "each **Incident"** or "each **Occurrence**", the total limit of the Company's liability under this policy for all **Damages**.
- IV. DEDUCTIBLE: The Insured shall pay Damages and/or Claims Expenses for each Incident or Occurrence equal to the amount of the deductible, if any, specified in the Declarations. The Company's obligation to pay Damages and Claims Expenses on behalf of the Insured shall be excess of the deductible amount, if applicable, stated in the Declarations.

In the event more than one Coverage Part applies, only a single deductible shall apply.

- V. POLICY TERRITORY: This insurance applies to Bodily Injury, Property Damage, Personal Injury, or Advertising Injury which occurs anywhere in the world, provided that claim is made or Suit is brought within the United States of America, its territories or possessions, or Canada.
- VI. SUPPLEMENTARY PAYMENTS: The Company will pay, in addition to the applicable limit of liability:
 - A. up to \$500 for loss of earnings to each individual **Insured** for each day or part of a day of such **Insured**'s attendance at the Company's request at a trial, hearing or arbitration proceeding involving a civil suit against such **Insured** for covered **Damages**, but the amount so payable for any one or series of trials, hearings of arbitration proceedings arising out of the same **Incident** and/or **Occurrence** shall in no event exceed \$7,500; and

- B. reasonable expenses incurred by the **Insured** at the Company's request in assisting the Company in the investigation or defense of any claim or **Suit** covered hereunder.
- VII. EXCLUSIONS: This insurance does not apply:
 - with respect to Advertising Injury:
 - to any **Insured** in the business of advertising, broadcasting, publishing or telecasting, or
 - b. to any injury arising out of any act committed by the Insured with actual malice;
 - 2. to Advertising Injury arising out of:
 - failure of performance of contract, but this exclusion does not apply to the unauthorized appropriation of ideas based upon alleged breach of implied contract; or
 - b. infringement of trademark, service mark or trade name, other than titles or slogans, by use thereof on or in connection with goods, products or services sold, offered for sale or advertised, or
 - incorrect description or mistake in advertised price of goods, products or services sold, offered for sale or advertised;
 - to any obligation for which the **Insured** or any carrier as his/her insurer may be held liable under any workers' compensation, unemployment compensation or disability benefits law, or under any similar law;
 - to **Bodily Injury, Personal Injury** or **Advertising Injury** to any employee of the **Insured** arising out of and in the course of his/her employment by the **Insured** or to any obligation of the **Insured** to indemnify another because of **Damages** arising out of such injury;
 - 5. to Bodily Injury or Property Damage arising out of the ownership, maintenance, operation, use, loading or unloading of:
 - a. any watercraft owned or operated by or rented or loaned to any insured, or
 - b. any other watercraft operated by any person in the course of his/her employment by any Insured;

This exclusion does not apply to any watercraft under 26 feet in length provided such watercraft is neither owned by the **Named Insured** nor being used to carry persons or property for a charge. Irrespective of this coverage, where the **Insured** is covered or protected by other insurance against any loss or claim which would otherwise have been paid by the company under this policy there shall be no contribution or participation by this company on the basis of excess, contributing, deficiency, concurrent, or double insurance or otherwise.

6. to any claim, action, judgment, liability, settlement, loss defense, cost or expense in anyway arising out of actual, alleged or threatened pollution, contamination or any environmental impairment resulting from seepage, discharge, dispersal, release or escape of any solid, liquid, gaseous or radioactive matter including, but not limited to, smoke, vapors, soots, fumes, acids, alkalis, chemicals or toxic matter; or waste material (including materials to be recycled, reconditioned or reclaimed); or oil or other petroleum substances or derivatives (including any oil refuse or oil mixed with waste), or thermal or vibratory effect including, but not limited to, sound or noise, heat or cold, into or upon land, the atmosphere or any water course or body of water, underground water or water table supplies, whether such results directly, indirectly or in concurrence or in any sequence from the Insured's activities or the activities of others and whether or not such is sudden, gradual, accidental, intended, foreseeable, expected, fortuitous or inevitable and wherever or however such occurs.

But this exclusion shall not apply to **Bodily Injury** or **Property Damage** caused by heat, smoke or fumes from a **Hostile Fire** unless such fire involves:

materials which are or were at any time used for the handling, storage, disposal, processing or treatment of waste; or

- any premises, site, or location:
 - i. which is or was at any time used for handling, storage, disposal, processing or treatment of waste, or
 - ii. on which any **insured** or contractors or subcontractors working directly or indirectly on any **insured's** behalf are performing operations to test for, monitor, cleanup, remove, contain, treat, detoxify or neutralize, or in anyway respond to, or assess the effects of, pollutants:
- 7. to **Bodily Injury** or **Property Damage** due to war, whether or not declared, civil war, insurrection, rebellion or revolution or to any act or condition incident to any of the foregoing;
- 8. to **Bodily Injury**, or **Property Damage** for which the **Insured** or his indemnitee may be held liable:
 - as a person or organization engaged in the business of manufacturing, distributing, selling or serving alcoholic beverages, or
 - b. if not so engaged, as an owner lessor of premises used for such purposes, if such liability is imposed by, or because of the violation of any statute, ordinance or regulation pertaining to the sale, gift, distribution or use of any alcoholic beverage, including the selling, serving or giving of any alcoholic beverage to a minor;
- 9. To **Property Damage** included within:
 - a. the Explosion Hazard,
 - b. the Collapse Hazard.
 - c. the Underground Property Damage Hazard;
- 10. to any dishonest, fraudulent, criminal, or malicious act or omission of any insured;
- 11. to any claim made by an employer against an insured who is a salaried employee of such employer;
- to acts or omissions by any **Insured** expected or intended to cause **Bodily Injury** or **Property Damage**, regardless of whether or not such act or omission was intended to cause the specific **Bodily Injury** or **Property Damage** sustained. This exclusion shall not apply to any intentional act by or at the direction of the **Insured** which results in **Bodily Injury**, if such injury arises solely from the use of reasonable force for the purpose of protecting persons or property;
- 13. to liability assumed by any Insured under any contract or agreement, except to the extent:
 - a. such **Insured** would be liable in the absence of such contract or agreement, or
 - b. the contract or agreement is an Incidental Contracts pursuant to the Contractual Liability
 Coverage Part;
- 14. to **Bodily Injury** or **Property Damage** arising out of the ownership, maintenance, operation, use, loading or unloading of:
 - a. any Automobile or aircraft owned or operated by or rented or loaned to any Insured, or
 - b. any other Automobile or aircraft operated by any person in the course of his or her employment by any Insured;

but this exclusion does not apply to the parking of an automobile on premises owned by, rented to or controlled by the **Named Insured** or the ways immediately adjoining, if such **Automobile** is not owned by or rented or loaned to any **Insured**;

to **Bodily Injury** or **Property Damage**, arising out of (1) the ownership, maintenance, operation, use, loading or unloading of any **Mobile Equipment** while being used in any prearranged or organized racing speed or demolition contest or in any stunting activity or in practice or preparation for any such contest or activity, or (2) the operation or use of any snowmobile or trailer designed for use therewith;

- 16. to **Bodily Injury** or **Property Damage** arising out of and in the course of the transportation of **Mobile Equipment** by an **Automobile** owned or operated by or rented or loaned to any **Insured**;
- 17. to **Damage** to property owned or occupied by or rented to the **Insured**, or to property held by the **Insured** for sale or entrusted to the **Insured** for storage or safekeeping;
- to **Property Damage** to premises alienated by the **Named Insured** arising out of such premises or any part thereof;
- 19. to loss of use of tangible property which has not been physically injured or destroyed resulting from:
 - a. a delay in or lack of performance by or on behalf of the **Named Insured** or any contract or agreement,
 - b. the failure of the **Named Insured's** products or work performed by or on behalf of the **Named Insured** to meet with the level of performance, quality, fitness or durability warranted or represented by the **Named Insured**.

but this exclusion does not apply to loss of use of other tangible property resulting from the sudden and accidental physical injury to or destruction of the **Named insured's Products** or work performed by or on behalf of the **Named insured** after such products or work have been put to use by any person or organization other than an **Insured**;

- 20. to Property Damage to the Named Insured's Products arising out of the use of such products or any part of such products;
- 21. to claims brought for the withdrawal, inspection, repair, replacement, or loss of use of the Named Insured's Products or work completed by or for the Named Insured or of any property of which such products or work form a part, if such products, work or property are withdrawn from the market or from use because of any known or suspected defect or deficiency therein;
- 22. to claims brought against any **insured** as a proprietor, owner, partner, manager, superintendent, or officer of any hospital, sanitarium, medical clinic, health maintenance organization, managed care facility, or any other facility not specified in the Declarations or any endorsement thereto;
- to claims arising out of services performed by any insured as a physician, surgeon, dentist, nurse midwife, chiropractor, podiatrist, osteopath, psychiatrist, attorney, accountant, financial advisor, investment consultant or real estate or insurance agent or broker; or to claims brought against the insured arising out of any trade, business, employment, profession or occupation other than as specified in the Declarations or any endorsement thereto;
- 24. to claims based on or arising out of the practice of the Named Insured's business or professional occupation as stated in the Declarations unless the Named Insured is properly licensed or certified by the laws of the state(s) in which the Insured practices or conducts business or is otherwise qualified to practice the Named Insured's business or professional occupation in the absence of such law;
- 25. to claims based on or arising out of services by any insured, to the extent such services are not authorized or permitted by the laws of the state(s) in which such insured practices or conducts business;
- 26. to any claims made or Suits brought against any Insured alleging in whole or part,
 - physical assault, abuse, molestation, or habitual neglect, or licentious, immoral, amoral or other behavior that was committed or alleged to have been committed, by the **Insured** or by any person for whom the **Insured** is legally responsible, and/or
 - sexual assault, abuse, or molestation, or licentious, immoral, amoral or other behavior which was threatened, intended to, lead to or culminated in, any sexual act whether committed intentionally, negligently, inadvertently or with the belief, erroneous or otherwise, that the other party is consenting and has the legal and mental capacity to consent thereto, that was committed, or alleged to have been committed by the **Insured** or by any person for whom the **Insured** is legally responsible.

This exclusion applies regardless of the legal theory or basis upon which the **Insured** is alleged to be legal, liable or responsible in whole or in part, for any **Damages** arising out of sexual and/or physical abuse, including but not limited to assertions of improper or negligent hiring, employment or supervision, failure to protegor warn the other party, failure to prevent the sexual abuse and/or physical abuse, failure to prevent assault and battery, failure to discharge the employee.

However, notwithstanding the foregoing exclusion, the **Insured** shall be entitled to a defense as provided under the terms of the policy as to any claim upon which suit is brought for any such alleged behavior, unless a judgment or final adjudication adverse to any **Insured**, or an admission by any **Insured**, shall establish that such behavior caused, in whole or part, the injury claimed in such claim or **Suit**. The Company shall not be required to appeal a judgment or final adjudication adverse to the **Insured**.

- 27. to Bodily Injury and Property Damage included within the Products Hazard or Completed
 Operations Hazard;
- 28. as respects Personal Injury and Advertising Injury Liability coverages, to Personal Injury or Advertising Injury arising out of:
 - a. the willful violation of a penal statute or ordinance committed by or with the knowledge or consent
 - b. a publication or utterance of a libel or slander, or a publication or utterance in violation of an individual's right of privacy if the first injurious publication or utterance of the same or similar material by or on behalf of the **Named insured** was made prior to the effective date of this insurance;
 - c. libel or slander or the publication or utterance of defamatory or disparaging material concerning any person or organization or goods, products or services, or in violation of an individual's right of privacy, made by or at the direction of the **Insured** with knowledge of the falsity thereof;
- 29. to any claims brought by or on behalf of any person employed by the **Named insured**, any person who had been employed by the **Named insured** or any person seeking employment with the **Named insured** alleging any act or omission by an **insured** with respect to the hiring, termination, compensation, or the tenure, condition, benefits or privilege of employment of any such person;
- 30. __to any claim brought by, or on behalf of, any **insured** under this policy against any other **insured** under this policy, except if such claim results from services rendered in a patient or client relationship.
- VIII. DEFINITIONS: When used in this policy (including endorsements forming a part hereof):

"Advertising Injury" means injury arising out of an offense committed during the Policy Period occurring in the course of the Named Insured's advertising activities, if such injury arises out of libel, slander, defamation, violation or right of privacy, piracy, unfair competition, or infringement of copyright, title or slogan;

"Automobile" means a land motor vehicle, trailer or semi-trailer designed for travel on public roads (including any machinery or apparatus attached thereto), but does not include Mobile Equipment;

"Bodily Injury" means bodily injury, sickness or disease, mental anguish, psychological injury or emotional distress sustained by any person which occurs during the Policy Period including death at any time resulting therefrom;

"Claims Expenses" means:

- A. fees charged by an attorney(s) and/or an independent adjustor(s) designated by the Company and all other fees, costs and expenses resulting from the investigation, adjustment, defense and appeal of a claim, **Suit** or consent of the Company, but does not include salary charges or expenses of regular employees or officials.
- B. all costs taxed against the **Insured** in such **Suits** and all interest on the entire amount of any judgment therein which accrues after entry of the judgment and before the Company has paid, tendered or deposited, whether in court or otherwise, the part of the judgment which does not exceed the limit of the Company's liability;

C. premiums on appeal bonds and premiums on bonds to release attachments in such Suits, but not for bond amounts in excess of the applicable limit of liability of this policy, but the Company shall have no obligation to apply for or furnish any such bond;

"Collapse Hazard" includes "Structural Property Damage" as defined herein and Property Damage to any other property at any time resulting therefrom. "Structural Property Damage" means the collapse of or structural injury to any building or structure due to:

- A. grading of land, excavating, borrowing, filling, back-filling, tunneling, pile driving, cofferdam work or caisson work or
- B. moving, shoring, underpinning, raising or demolition of any building or structure or removal or rebuilding of any structural support thereof.

The Collapse Hazard does not include Property Damage:

- A. arising out of operations performed for the Named Insured by independent contractors, or
- B. included within the Completed Operations Hazard of the Underground Property Damage Hazard, or
- C. for which liability is assumed by the insured under an incidental Contract;

"Completed Operations Hazard" includes Bcoliny Injury and Property Damage arising out of operations or reliance upon a representation or warranty made by any time with respect thereto, but only if the Bodily Injury or Property Damage occurs after such operations have been completed or abandoned and occurs away from premises owned by or rented to the Named Insured. "Operations" include materials, parts or equipment furnished in connection therewith. Operations shall be deemed completed at the earliest of the following time:

- A. when all operations to be performed by or on behalf of the Named Insured under the contract have been completed,
- when all operations to be performed by or on behalf of the **Named Insured** at the site of the operations have been completed, or
- when the portion of the work of which the injury or **Damage** arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

Operations which may require further service, maintenance work, correction, repair or replacement because of any defect or deficiency, but which are otherwise complete, shall be deemed completed.

The Completed Operations Hazard does not include Bodily Injury or Property Damage arising out of:

- A. operations in connection with the transportation of property, unless the **Bodily Injury** or **Property Damage** arises out of a condition in or on a vehicle created by the loading or unloading thereof,
- B. the existence of tools, installed equipment or abandoned or unused materials, or
- C. operations for which the classification stated in the policy or in the Company's manual specified "including completed operations";

"Damages" means compensatory judgments, settlements, or awards but does not include punitive or exemplary Damages, fines or penalties, the return of fees or other consideration paid to the **Insured**, or the portion of any award or judgment caused by the multiplication of actual **Damages** under federal or state law. However, if a **Suit** is brought against the **Insured** with respect to a claim for alleged acts or omissions falling within the scope of coverage afforded by this insurance seeking both compensatory and punitive or exemplary **Damages**, then the Company will afford a defense to such action, without liability however, for payment of such punitive or exemplary **Damages**;

"Explosion Hazard" includes Property Damage arising out of blasting or explosion. The Explosion Hazard does not include Property Damage:

A. arising out of the explosion of air or steam vessels, piping under pressure, prime movers, machinery or power transmitting equipment, or

- arising out of operations performed for the Named Insured by independent contractors, or
- C. included within the Completed Operations Hazard or the Underground Property Damage Hazan
 or
- D. for which liability is assumed by the Insured under an Incidental Contract;

"Hostile Fire" means one which becomes uncontrollable or breaks out from where it was intended to be;

"Incident" means any act or omission:

- A. in the rendering of or failure to render services by the **Insured**, or by any person for whom the **Insured**; legally responsible, in the conduct of the business or professional occupation shown in the Declarations;
- B. in the performance of services by the **insured** as a member of a formal accreditation, ethics, peer review or similar professional board or committee of a professional not-for-proformal accreditation, in the conduct of the **insured's** business or in the practice of the **insured's** professional occupation.

Any such act or omission together with all related acts or omissions shall be considered one **Incident** and be subject to the same limit of liability;

"Incidental Contract" means any oral or written contract or agreement relating to the conduct of the Name insured's business, except as respects Fire Legal Liability coverage;

"Insured" means any person or organization qualifying as an Insured in the "Persons Insured" provision. The insurance afforded applies separately to each Insured against whom claim is made or Suit is brought, except with respect to the limits of the Company's liability;

"Mobile Equipment" means a land vehicle (including any machinery or apparatus attached thereto), whether or no

- A. not subject to motor vehicle registration, or
- B. maintained for use exclusively on premises owned by or rented to the Named Insured, including the way.
- C. designed for use principally off public roads, or
- designed or maintained for the sole purpose of affording mobility to equipment of the following types forming an integral part of or permanently attached to such vehicle: power cranes, shovels, loaders, diggers and drills concrete mixers (other than the mix-in-transit type); graders, scrappers, rollers and other road construction or repair equipment; air-compressors, pumps and generators, including spraying, welding and building cleaning equipment; and geophysical exploration and well servicing equipment;

"Named Insured" means the person or organization named in Item 1. of the Declarations of this policy. "Named Insured" also shall include any organization which is acquired or formed by the Named Insured and over which the Named Insured maintains ownership or majority interest, other than a joint venture, provided this insurance does not apply to Bodily Injury Property Damage, Personal Injury or Advertising Injury if such new organization is also an Insured under any other similar liability or indemnity policy or would be insured under any such policy but for exhaustion of its limits of liability. Unless written notice is given to the Company, this coverage shall terminate 90 days from the date any such organization is acquired or formed by the Named Insured, or the end of the Policy Period whichever is earlier, and shall only apply to claims brought against the Insured arising of the business or professional occupation specified in the Declarations;

"Named Insured's Products" means goods or products manufactured by the Named Insured or by other trading under the name of the Named Insured, including any container thereof;

"Occurrence" means an accident, including continuous or repeated exposure to substantially the same general conditions, which results in **Bodily Injury** or **Property Damage** neither expected nor intended from the standpoint of any **Insured** or **Advertising Injury**;

"Personal Injury" means any injury resulting from:

A. false arrest, detention or imprisonment, or malicious prosecution;

- B. the publication or utterance of a libel or slander or of other defamatory or disparaging material, or a publication or utterance in violation of an individual's right of privacy; except publications or utterances in the course of or related to advertising, broadcasting or telecasting activities conducted by or on behalf of the **Named Insured**:
- C. wrongful entry or eviction, or other invasion of the right of private occupancy;

"Policy Period" means, whenever used in this policy, the period from the inception date of this policy to the policy expiration date as set forth in the Declarations or its earlier termination date, if any;

"Products Hazard" includes Bodily Injury and Property Damage arising out of the Named Insured's Products or reliance upon a representation or warranty made at any time with respect thereto, but only if the Bodily Injury or Property Damage occurs away from premises owned by or rented to the Named Insured and after physical possession of such products has been relinquished to others. Equipment specifically designed, made or altered by the Insured for a patient or client in the performance of the Insured's professional occupation or conduct of business, shall not be included in the "Products Hazard";

"Property Damage" means:

- A. physical injury to or destruction of tangible property which occurs during the **Policy Period**, including the loss of use thereof at any time resulting therefrom,
- B. loss of use of tangible property which has not been physically injured or destroyed provided such loss of use is caused by an occurrence during the policy period, or
- C. economic loss, whether or not resulting from physical injury or damage to person or property, except if such loss was caused, or alleged to have been caused, in whole or part, by anti-trust, price-fixing, restraint of trade or unfair business practices by any insured.

"Suit" includes lawsuit, arbitration proceedings to which the Insured is required to submit to or to which the Insured has submitted with the Company's consent;

"Underground Property Damage Hazard" includes Underground Property Damage as defined herein and Property Damage to any other property at any time resulting therefrom. "Underground Property Damage" means Property Damage to wires, conduits, pipes, mains, sewers, tanks, tunnels, any similar property, and any apparatus in connection therewith, beneath the surface of the ground or water, caused by and occurring during the use of mechanical equipment for the purpose of grading land, paving, excavating, drilling, borrowing, filling, back-filling or pile driving. The Underground Property Damage Hazard does not include Property Damage:

- A. arising out of operations performed for the Named Insured by independent contractors, or
- B. included within the Completed Operations Hazard, or
- C. of which liability is assumed by the Insured under an Incidental Contract.

IX. CONDITIONS

A. ACTION AGAINST COMPANY: No action shall lie against the Company unless, as a condition precedent thereto, there shall have been full compliance with all of the terms of this policy, nor until the amount of the Insured's obligation to pay shall have been finally determined either by judgment against the **Insured** after actual trial or by written agreement of the **Insured**, the claimant and the Company.

Any person or organization or the legal representative thereof who has secured such judgment or written agreement shall thereafter be entitled to recover under this policy to the extent of the insurance afforded by this policy. No person or organization shall have any right under this policy to join the Company as a party to any action against the **Insured** to determine the **Insured**'s liability, nor shall the Company be impeded by the **Insured** or the **Insured**'s legal representative.

ASSIGNMENT: Assignment of interest under this policy shall not bind the Company until its consent is endorsed herein; if, however, the **Named Insured** shall die, such insurance is afforded by this policy shall apply (1) to the **Named Insured's** legal representative as the **Named Insured**, but only while acting within the scope of his/her duties as such, and (2) with respect to the property of the **Named Insured**, to the person having proper temporary custody thereof, as **Insured**, but only until the appointment and qualification of the legal representative.

C. ASSISTANCE AND COOPERATION OF INSURED: The **Insured** shall give written notice to the Companias soon as practicable of any claim made against the **Insured** or of any specific circumstances involving particular person likely to result in a claim. The notice shall identify the **Insured** and contain reasonable obtainable information with respect to the time, place and circumstances of the injury, including the name and addresses of the injured and of available witnesses and the extent of the type of claim anticipated. It claim is made or **Suit** is brought against the **Insured**, the **Insured** shall immediately forward to the Companievery demand, notice, summons or other process received by the **Insured** or the **Insured**'s representative

The **Insured** and each of its employees shall cooperate with the Company and, upon the Company's request assist in making settlements, in the conduct of **Suits** and enforcing any right of contribution or indemnity against any person or organization who may be liable to the **Insured** because of injury or **Damage** with respect to which this insurance is afforded under this policy; and the **Insured**, and any of its members, partners, officers directors, stockholders and employees that the Company deems necessary shall attend hearings and trials and assist in securing and giving evidence and obtaining the attendance of witnesses. The **Insured** shall not, except at the **Insured's** own cost, voluntarily make any payments, assume any obligations or incur any expense.

- D. BANKRUPTCY OR INSOLVENCY: Bankruptcy or insolvency of the **Insured** or of the **Insured**'s estate shall not relieve the Company or any of its obligations hereunder.
- E. CANCELLATION, NONRENEWAL, RENEWAL RATE INCREASE, OR CHANGE IN TERMS:
 - I. CANCELLATION. This insurance may be cancelled on the customary short rate basis by the Named insured at any time by written notice or by surrender of this insurance to the Company or its authorized representative and the Company shall refund the paid premium less the earned portion thereof within thirty (30) days of the latter of the effective date of cancellation or the date of delivery of the insured's notice of intent to cancel. This insurance may also be cancelled, with or without the return or tender of the unearned premium, by the Company or by its authorized representative on its behalf, by sending to the Named Insured, by first class registered or certified mail, at Named Insured's address last known to the Company or its authorized agent, but not less than ninety (90) days written notice stating the specific reason such cancellation and when the cancellation shall be effective. In such case, the Company shall refund the paid premium less the earned portion thereof within ten (10) business days after the effective date of cancellation, subject always to the retention by the Company of any minimum premium stipulated herein (or proportion thereof previously agreed upon) in the event of cancellation either by the Company or the Named Insured. In case of nonpayment of premium only fifteen (15) days written notice of cancellation must be given by the Company.

Cancellation by the Company shall only be effective is based on one or more of the following reasons

- a. nonpayment of premium,
- b. the policy was obtained through material misrepresentation,
- c. violation of any of the terms and conditions of the policy,
- d. the risk originally accepted has measurably increased, or
- e. loss by the Company of reinsurance which provided coverage for all or a substantial part of the risk insured.
- 2. NONRENEWAL: The Company will renew this policy unless written notice of the Company's intended not to renew, stating the specific reasons for nonrenewal, is mailed to the **Named Insured** not less than sixty (60) days before the policy expires.

Any notice of nonrenewal will be mailed by first class registered or certified mail to the **Named Insured** at the last mailing address known to the Company. Proof of mailing will be sufficient proof of notice.

- 3. RENEWAL RATE INCREASE OR CHANGE IN POLICY TERMS: If the Company increases your rate, changes the deductible, reduces the limit and/or substantially reduces coverage at renewal, the Company will mail to the **Named Insured** at least sixty (60) days prior to the effective date of that increase or change:
 - written notice of any changes in coverage terms,
 - b. an estimate of the rate of increase. If the rate increase is thirty percent (30%) or more, the exact amount of the rate increase will be stated.

A rate increase is defined as any factor that would change the premium other than a change in exposure.

Any notice of renewal rate increase or change in policy terms will be mailed by first class registered or certified mail to the **Named Insured** at the last mailing address known to the Company. Proof of mailing will be sufficient proof of notice.

- CHANGES: The terms of this policy shall not be waived or changed, except by endorsement issued to form part of this policy.
- DECLARATIONS: By acceptance of this policy, the **Named Insured** agrees that the statements in the Declarations are the **Named Insured**'s agreements and representations, that this policy is issued in reliance upon the truth of such representations and that this policy embodies all agreements existing between the **Named Insured** and the Company or any of its agents relating to this insurance.
- H. OTHER INSURANCE: If there is other valid insurance (whether primary, excess, contingent or self-insurance) which may apply against a loss or claim covered by this policy, the insurance provided hereunder shall be deemed excess insurance over and above the applicable limit of all other insurance or self-insurance.

When this insurance is excess, the Company shall have no duty under this policy to defend any claim or **Suit** that any other insurer or self-insurer has a duty to defend. If such other insurer or self-insurer refuses to defend such claim or **Suit**, the Company shall be entitled to the **Insured's** rights against all such other insurers or self-insurers for any defense costs incurred by the Company.

When both this insurance and other insurance or self-insurance apply to the loss on the same basis, whether primary, excess or contingent, the Company shall not be liable under this policy for a greater proportion of the loss or defense costs than the applicable limit of liability under this policy for such loss bears to the total applicable limit of liability of all valid and collectible insurance against such loss. Subject to the foregoing, if a loss occurs involving two or more policies, each of which provides that its insurance shall be excess, each will contribute pro rata.

- I. REIMBURSEMENT: If the Company pays any amount:
 - . within the amount of the applicable deductible and/or
 - 2. in excess of the limit of liability stated in the Declarations

all **Insureds** shall be jointly and severally liable to the Company for such amounts. Payment will be made to the Company within thirty (30) days of demand for reimbursement.

- SUBROGATION: In the event of any payment under this policy, the Company shall be subrogated to all the **Insured's** rights of recovery therefore against any person, organization or entity and the **Insured** shall execute and deliver instruments and papers and do whatever else is necessary to secure such rights. The **Insured** shall do nothing after any loss to prejudice such rights.
- C. PREMIUM: All premiums for this policy shall be computed in accordance with the Company's rules, rates, rating plans, premiums and minimum premiums applicable to the insurance afforded herein.

---- acongriated in this policy is a deposit premium only which shall be credited to the amount of the early premium due at the end of the **Policy Period**. At the close of each period (or part thereof terminating w the end of the policy period) designated in the declarations as the audit period the earned premium shall computed for such period, and upon notice thereof to the Named Insured, shall become due and paya If the total earned premium for the Policy Period is less than the premium previously paid, the Compa shall return to the Named Insured the unearned portion paid by the Named Insured.

The Named Insured shall maintain records of such information as is necessary for premium computation and shall send copies of such records to the company at the end of the policy period and at such times dun

INSPECTION AND AUDIT: The Company shall be permitted but not obligated to inspect the Name Insured's property and operations at any time. Neither the Company's rights to make inspections north making thereof nor any report thereon shall constitute an undertaking, on behalf of or for the benefit of Named Insured or others, to determine or warrant that such property or operations are safe or health or are in compliance with any law, rule or regulation.

The Company may examine and audit the Named insured's books and records at any time during the Polic Period and extensions thereof and within three years after the final termination of this policy as far as the

IN WITNESS WHEREOF, the Company has caused this policy to be signed by its President and Secretary.

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The following endorsement modifies the provisions of this policy:

Muclear Energy Liability Exclusion and Endorsement--Broad Form

tils agreed that:

The policy does not apply:

- Under any Liability Coverage, to Bodily injury or Property Damage
 - with respect to which an insured under the policy is also an insured under a nuclear energy liability policy issued by Nuclear Energy Liability Insurance Association, Mutual Atomic Energy Liability Underwriters or Nuclear Insurance Association of Canada, or would be an Insured under any such policy but for its termination upon the exhaustion of its limit of liability;
 - resulting from the Hazardous Properties of Nuclear Material and with respect to which (a) any person or organization is required to maintain financial protection pursuant to the Atomic Energy Act of 1954, or any law mandatory thereof. or (b) the insured is, or had this policy not been issued would be entitled to indemnity from the United States of America or any agency thereof, under any agreement entered into by the United States of America, or any agency thereof, with any person or organization.
- Under any Medical Payments Coverage, or under any Supplementary Payments or Claims Expenses provision relating to first aid, to expenses incurred with respect Bodily Injury resulting from the Hazardous Properties of Nuclear Material and arising out of the operation of a Nuclear Facility by any person or organization.
- Under any Liability Coverage, to Bodily Injury or Property Damage resulting from the Hazardous Properties of Nuclear Material, if
 - the Nuclear Material (a) is at any Nuclear Facility owned by, or operated by or on behalf of, any insured or (b) has $\langle 1 \rangle$ been discharged or dispersed therefrom;
 - the Nuclear Material is contained in Spent Fuel or Waste at any time possessed, handled, used, processed, stored, transported or disposed of by or on behalf of an Insured; or
 - the Bodily Injury or Property Damage arises out of the furnishing by an Insured of services, materials, parts or equipment in connection with the planning, construction, maintenance, operation or use of any Nuclear Facility, but if such facility is located within the United States of America, its territories or possession or Canada, this exclusion (3) applies only to Property Damage to such Nuclear Facility and any property thereof.

As used in this endorsement:

"Hazardous Properties" include radioactive, toxic or explosive properties;

"Nuclear Material" means Source Material, Special Nuclear Material or By-product Material;

"Source Platerial" "Special Nuclear Material" and "By-product Material" have the meanings given them in the Atomic Energy Act of 1954 or in any law amendatory thereof:

"Spent Fuel" means any fuel element or fuel component, solid or liquid, which has been used or exposed to radiation in a Nuclear Reactor;

"Waste" means any waste material

containing By-product Material other than the tailings or Wastes produced by the extraction or concentration of uranium or thorium from any ore processed primary for its source material content, and

resulting from the operation by any person or organization of any Nuclear Facility included under the first two paragraphs of the definition of Nuclear Facility:

"Nuclear Facility" means

any equipment or device designed or used for (1) separating the isotopes of uranium or plutonium (2) processing or utilizing Spent

Fuel, or (3) handling, processing or packaging Waste, any equipment or device used for the processing, fabricating or alloying of Special Muclear Material if at any time the total amount of such material in the custody of the Insured at the premises where such equipment or device is located consists of or contains more than 25 grams of plutonium or uranium 233 or any combination thereof, or more than 250 grams of uranium 235, any structure, basis, excavation, premises or place prepared or used for the storage of disposal of Waste, and includes the site on

which any of the foregoing is located, all operations conducted on such site and all premises used for such operations;

"Nuclear Reactor" means any apparatus designed or used to sustain nuclear fission in self-supporting chain reaction or to contains critical mass of fissionable material:

"Property Damage" includes all forms of radioactive contamination of property.

New York - It is agreed that the provisions of the "Nuclear Energy Liability Exclusion Endorsement-Board Form" printed above. go not apply in New York with respect to any Non-Owned Auto Liability Coverage afforded by this policy

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

FEDERAL RISK RETENTION ACT NATIONWIDE AMENDATORY ENDORSEMENT --- SHORT FORM

The following terms are hereby added to the policy and supersede any similar terms which may be contained therein.

CANCELLATION/NONRENEWAL/RENEWAL PREMIUM INCREASE

CANCELLATION BY THE NAMED INSURED The company shall refund the paid premium less the earned portion thereof within thirty (30) days of the latter of the effective date of cancellation or the date of delivery of the Insured's notice of intent to cancel, subject always to the retention by the Company of any minimum premium stipulated herein (or proportion thereof previously agreed upon).

The earned portion of the premium shall be computed on the customary short-rate basis unless any state law or regulation of the state shown in the mailing address of the Named Insured on the Declarations Page requires that return premium be computed on a pro-rata basis, even in the event of cancellation by the Named Insured.

CANCELLATION BY THE COMPANY

COMPUTATION OF RETURN PREMIUM

Minimum premium shall not apply to the return of unearned premium if cancellation is by the company.

CANCELLATION FOR NON-PAYMENT OF PREMIUM

Sending of Notice: In case of cancellation due to non-payment of premium, thirty (30) days written notice of cancellation must be given by the Company.

REASONS FOR CANCELLATION LIMITED

Cancellation by the Company shall only be effective if based on one or more of the following reasons:

Nonpayment of premium:

- The policy was obtained through a material misrepresentation that was relied on by the Company, and such policy would not have been issued by the Company under the same terms and conditions if correct information had been disclosed:
- Material failure to comply with policy terms, conditions or contractual duties; The risk originally accepted has measurably increased;

Loss by the Company of reinsurance which provided coverage for all or a substantial part of the risk insured.

NON-RENEWAL AND RENEWAL RATE INCREASE OR CHANGE IN POLICY TERMS:

NON-RENEWAL: The Company will renew this policy unless written Notice of the Company's intent not to renew, stating the specific reasons for nonrenewal, is mailed to the Named Insured not less than 90 days before the policy expires. "Non-renewal" shall include the failure of the Company to offer a renewal policy which provides types and limits of coverage substantially equivalent to those contained in the expiring policy.

RENEWAL RATE INCREASE OR CHANGE IN POLICY TERMS: If the Company increases your rate, changes the deductible, reduces the limit, or reduces coverage at renewal, the Company will mail to the Named Insured at least sixty (60) days prior to the effective date of that increase or change:

Written notice of any change in coverage;

The amount of our rate increase.

A rate increase is defined as any increase in premium except increase due to change in exposure (including claims-made step factors) and/or rating plans based solely on the Insured's developed experience.

SENDING OF NOTICES

Any notice of cancellation, nonrenewal or renewal premium increase or change in policy terms will be mailed by first class registered or certified mail to all Named Insureds at the last mailing address known to the Company. Proof of mailing will be sufficient proof of notice.

- Prejudgment interest, where payable under this policy, will be in addition to the limits of liability stated in the HI. declarations.
- In the event that this policy contains a Reimbursement condition, it shall be deleted in its entirety and replaced by:

Reimbursement: While the Company has no duty to do so, if the Company pays Damages or Claim Expenses:

- within the amount of the applicable deductible; or
- in excess of the applicable limit of liability

all Insureds shall be jointly and severally liable to the Company for such amounts. Upon written demand, the

shall repay such amounts to the Company within thirty (30) days thereof. Failure to pay any amount indicated may lead to policy cancellation.

In the event that this Policy contains an ACTION AGAINST COMPANY Condition, that condition shall be deleted in its entirety and replaced by:

LEGAL ACTION AGAINST THE COMPANY

A person or organization may bring a suit against the Company including, but not limited to, a suit to recover on an agreed settlement or on a final judgment against an Insured; but the Company will not be liable for damages that are not payable under the terms of this policy or that are in excess of the applicable limit of insurance. An agreed settlement means a settlement and release of liability signed by the Company, the Insured and the claimant or the claimant's legal representative.

However, no action by an Insured shall lie against the Company unless there has been full compliance with all of the terms of this policy.

In the event that this policy contains a DECLARATIONS and APPLICATIONS Condition, it shall be deleted in its entirety and replaced by:

DECLARATIONS and APPLICATIONS:

By acceptance of this policy, the Insured agrees that the statements in the Declarations are his agreements and representations, and that this policy is issued in reliance upon the truth of such representations and that this policy embodies all agreements existing between himself and the Company or any of its agents relating to this insurance.

In the event this is a claims-made policy:

An automatic sixty (60) day Extended Reporting Period Option, effective at the termination of the policy period, will be provided by the Company at no additional cost unless this insurance is replaced with the same or similar insurance issued by the Company, whether or not the limits or deductibles are identical to those provided under this policy. This extended reporting period option shall only apply to claims made during the policy period and reported to the Company within sixty (60) days of the policy termination. The limits available under this extension shall be part of, and not in addition to, the limits available under the expiring policy period. Coverage provided by this automatic extended reporting period shall be specific excess over any replacement policy providing the same or similar coverage. This Extended Reporting Period option shall not be available if the policy is cancelled for non-payment of premium effective at policy inception.

Any provision in the policy which conflicts with this extension is amended accordingly.

Notwithstanding any terms or conditions contained within the policy to the contrary, in the event an EXTENDED REPORTING PERIOD or DISCOVERY PERIOD clause is contained in this policy:

in the case of cancellation or non-renewal of this policy by the Named Insured or the Company for any reason other than flat cancellation by the Company effective at policy inception for non-payment of premium; or

in the case of advancing a retroactive or prior acts date from one previously applied by the Company.

the Named Insured shall have the right, subject to the other terms and conditions of this policy, or any endorsement attached thereto, to have an endorsement issued extending the time during which claims can be reported. This right shall terminate sixty (60) days after the effective date of such action as is indicated in subparagraphs A or B above unless written notice of such election, together with the additional premium, is received by the Company or its authorized agent from the Named Insured within that sixty (60) day period.

- In the event that this is a claims-made policy which limits or excludes coverages for claims made as a result of acts. errors, omissions, occurrences or the rendering of or failure to render professional services which happen prior to the policy period if any insured could have "reasonably foreseen" that such actions might be expected to be the basis of a claim or suit prior to the policy period, "reasonably foreseen" shall mean:
 - Claims or incidents reported to any prior insurer;
 - unreported Claims or suits of which any Insured had received notice prior to the effective date of the first policy
 - incidents or circumstances that involve a particular person or entity which an Insured knew might result in a claim or suit prior to the effective date of the first policy issued by the Company to the Named Insured, and which was not disclosed to the Company.
- X. The SUBROGATION provision of the policy is deleted in its entirety and replaced by:

To the extent of any payment under this policy, the Company shall be subrogated to all the Insured's rights of recovery therefore against any person, organization, or entity and the Insured shall execute and deliver instruments and papers and do whatever else is necessary to secure such rights. The Insured shall do nothing after any loss to prejudice such rights.

In the event that this policy contains a CHANGES provision, that provision shall be deleted in its entirety and replaced CHANGES: The terms of this policy shall not be waived or changed except by endorsement issued to form a part of this policy.

In the event that the policy contains an exclusion of pollution or of pollutants, that exclusion shall be deleted in its entirety and replaced by the following: This policy shall not apply to any claim, action, judgment, liability, settlement, loss, defense, cost, or expense in anyway arising out of actual, alleged, or threatened pollution, contamination, or any environmental impairment resulting from seepage, discharge, dispersal, release or escape of any solid, liquid, gaseous or radioactive matter including but not limited to, smoke, vapors, soots, fumes, acids, alkalis, chemicals, or toxic matter; or waste material (including materials to be recycled, reconditioned, or reclaimed); or oil or other petroleum substances or derivatives (including any oil refuse or oil mixed with waste), or thermal or vibratory effect including, but not limited to, heat or cold, into or upon land, the atmosphere, or any water course or body of water, underground water or water table supplies, whether such results directly, indirectly, or in concurrence or in any sequence from the insured's activities or the activities of other and whether or not such is sudden, gradual, accidental, intended, foreseeable, expected, fortuitous, or inevitable and wherever or however such occurs.

But this exclusion shall not apply to bodily injury or property damage caused by heat, smoke, or fumes from a "hostile fire" unless such fire involves:

- materials which are or were at any time used for the handling, storage, disposal, processing or treatment of
- any premises, site, or location:
 - which is or was at any time used for the handling, storage, disposal, processing or treatment of waste;
 - on which any insured or contractors or subcontractors working directly or indirectly on any insured's behalf are performing operations to test for, monitor, cleanup, remove, contain, treat, detoxify, or neutralize, or in any way respond to, or assess the effects of, pollutants.

As used in this endorsement, "hostile fire means one which becomes uncontrollable or breaks out from where it was intended to be.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.

STUDENT BLANKET ENDORSEMENT INCLUDING SCHOOL AND ITS FACULTY MEMBERS AS ADDITIONAL INSUREDS

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

In consideration of the premium charged:

1. Section II. PERSONS INSURED of the policy is deleted in its entirety and replaced by:

PERSONS INSURED: Each of the following is an Insured under this insurance, to the extent set forth below:

- A. Students of the programs specified in the application on file with and approved by the Company, but only while said students are participating in activities which are a part of and a requirement of the students' curriculum at the school or university specified in Item 1, Named Insured, of the Declarations;
- B. Faculty Members of the school or university specified in Item 1, **Named Insured**, of the Declarations, but solely as respects claims arising out of the supervision/instruction of the **Insured** students for covered **"Incidents**".
- C. The school or university specified in Item 1, NAMED INSURED, of the Declarations, but solely as respects claims arising out of the supervision/instruction of the **Insured** students for covered "**Incidents**".
- 2. Section III. LIMITS OF LIABILITY is deleted in its entirety and replaced by:

LIMITS OF LIABILITY: Regardless of the number of Coverage Parts that apply, the number of **insureds** under this insurance, the number of persons and/or organizations who sustain **Bodily Injury**, **Property Damage**, **Personal Injury** and/or **Advertising Injury**, or the number of claims made or **Suits** brought, the Company's liability is limited as follows:

- A. The limit of liability stated in the Declarations as applicable to "each **Incident**" is the total limit of the Company's liability for all **Damages** for each **Incident** covered by the policy. All claims arising from the same or related **Incident** shall be considered a single claim for the purpose of this insurance and shall be subject to the same limit of liability.
- B. The limit of liability stated in the Declarations as "Aggregate" is, subject to the above provisions involving "each **Incident**", the total limit of the Company's liability under this policy for all **Damages**. Notwithstanding the foregoing, the limit of liability stated in the Declarations as "Aggregate" shall apply separately to any individual defined as an **Insured** under 1. PERSONS INSURED, Section A, above.
- 3. Section VI. SUPPLEMENTARY PAYMENTS is amended by the addition of:
 - C. The Company will pay, a maximum of \$1,000 per student, per **Policy Period**, subject to a maximum **Policy Period** limit of \$20,000 for (1) medical expenses incurred as a result of **Bodily Injury** to the **Insured** and/or (2) **Property Damage** to personal property owned by the **Insured**, caused by an "assault" by, or at the direction of, another.

Such "assault" must happen on the Insured's educational premises, including the ways immediately adjoining such educational premises, or while the Insured is away from such educational premises conducting an authorized activity pursuant to an educational program.

This supplementary payment does not apply to damage to any mode of transportation used by the **Insured** to go to and from the **Insured's** educational premises, or damage to any business or personal property owned, leased or rented by any other person or business enterprise while in the **Insured's** possession.

This supplementary payment applies as excess over any other available insurance covering such loss.

<u>Additional Definition</u>: "Assault", as used in this section, means any willful attempt or threat to inflict injury upon the person of another, when coupled with an apparent present ability so to do, and any intentional display of force such as would give the victim reason to fear or expect immediate bodily harm.

D. The Company will pay all medical related expenses for which the **Insured** has voluntarily made payment or has incurred up to a maximum of \$500 per student per **Policy Period**, for first aid being rendered to others as a result of

Page 1 of 3

any Bodily Injury covered by this policy, subject to a maximum per Policy Period limit of \$15,000; however, this provision does not apply to any person defined as an Insured in this policy.

The first aid must be provided within 48 hours of such Bodily Injury.

- E. The Company will pay to or for each person other than the Insured who sustains Bodily Injury caused by an Occurrence during the Policy Period:
 - 1. while on the premises owned by or rented to the **Insured** with the permission of the **Insured**, or
 - 2. while elsewhere if such Bodily Injury,
 - a. arises out of the premises owned by or rented to the Insured or a condition in the ways immediately adjoining,
 - b. is caused by the activities of the Insured, or
 - c. is caused by the activities of, or is sustained by, a residence employee while engaged in the employment of the Insured.

the reasonable expense of necessary medical, surgical, ambulance, hospital, professional nursing and funeral services, all incurred within four years from the date of Occurrence.

The Company's liability under this supplementary payment is limited as follows:

- A. The Company's limit of liability shall not exceed \$1,500, per Occurrence, for each person who sustains Bodily
- B. The total limit of the Company's liability under this supplementary payment, for all persons who sustain **Bodily** Injury during the Policy Period is, subject to the above provision, \$100,000.

This insurance shall not apply to claims brought against the Insured arising out of, in whole or part, the conduct of any trade, business, employment, profession or occupation.

- F. The Company will pay up to \$500 per Occurrence subject to a maximum of \$10,000 per Policy Period for damage to the property of others that is caused by the Insured. The Company will not pay for damage to the property of others if such damage arises out of:
 - a. intentional acts by any person defined as an insured;
 - b. any business pursuit;
 - c. any act or omission with regard to any premises, other than the Insured's residence premises, which is owned, rented or controlled by an Insured; or
 - d. the insured's ownership, use, care of, or entrustment to others of an automobile, mobile equipment, watercraft or aircraft.

Within 60 days from the date of loss, the Insured must submit a sworn statement of such loss to the Company. The Insured must also exhibit the damaged property if such property is in the Insured's possession and/or control.

G. The Company will pay a limit of \$1,500 per student for attorney fees, and other costs, expenses or fees resulting from the investigation or defense of all proceedings before a school grievance committee or academic disciplinary board incurred as the result of notice or notices of proceedings first received by the Insured during the Policy Period arising from the same or related Incident.

All such proceedings arising out of the same or related Incident shall be:

- 1. considered first made during the Policy Period in which the earliest complaint arising out of such, same or related Incident was made; and
- 2. subject to a single limit as stated above.

The amounts payable under this supplementary payment shall not exceed \$20,000 per Policy Period

- 4. Section VII. EXCLUSIONS of this policy is amended by the addition of the following:
- 31. To students engaged in programs to become physicians, surgeons, dentists, nurse midwives, chiropractors, Page 2 of 3 PLE-2157 (05/01)

podiatrists, osteopaths, psychiatrists, attorneys, accountants, financial advisors, investment consultants, real estate or insurance agents or brokers, cytotechnologists, or perfusionists, or any other student specialties not specified in the application on file with the Company unless specifically added by endorsement subsequent to policy issuance.

The definition of "Incident" included in Section VIII. DEFINITIONS of this policy is deleted in its entirety and replaced by the following:

"Incident" means any act or omission in the furnishing of professional health care services to a patient or client, including injury sustained by a fellow student in the practice of activities which are part of and a requirement of the students' curriculum.

Any such act or omission together with all related acts or omissions in the furnishing of such services to any one person shall be considered one "Incident", and be subject to the same limit of liability.

- 6. Section IX. CONDITIONS of this policy is amended by the addition of the following:
 - M. AUTHORIZATION. By acceptance of this policy, the Named Insured specified on the Declarations agrees to act on behalf of all other Insureds with respect to the giving and receiving of all notices to the Company required herein and the receiving of any return premiums that may become due under this policy and the Insureds agree that the Named insured shall so act on their behalf.

For purposes of this section, all such notifications shall be addressed to the individual specified on the application as the "Person to Contact At School" or their replacement, if any.

N. LIBERALIZATION. If the Company adopts a revision, at any time during the Policy Period, that would broaden the coverage under this policy without additional premium, the broadened coverage will immediately apply to this policy.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.

Page 3 of 3

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DATE OF ISSUE

PRIOR CERTIFICATE NUMBER

CLIENT NUMBER

PLP-2028 (01/95) (elec-a)

BRANCH B/A

PRODUCER NUMBER

INSURED COPY

CONSUMER INFORMATION NOTIFICATION

IMPORTANT INFORMATION TO PURCHASING GROUP MEMBERS KEEP THIS NOTICE WITH YOUR INSURANCE PAPERS.

PLEASE NOTE
PLEASE READ YOUR COVERAGE TERMS CAREFULLY.
THE POLICY MAY CONTAIN ONE OR MORE OF THE FOLLOWING EXCLUSIONS:
ASBESTOS, DISCRIMINATION, SEXUAL ASSAULT, TRANSMISSION OF DISEASE

AS ACCEPTED AND APPROVED BY YOUR RISK PURCHASING GROUP ASSOCIATION, THIS POLICY DOES NOT INSURE PUNITIVE OR EXEMPLARY DAMAGES THAT MAY BE SOUGHT AGAINST YOU. YOUR PREMIUM FOR THIS POLICY IS LOWER AS A RESULT OF THIS EXCLUSION.

THIS POLICY DOES NOT PROVIDE A REINSTATEMENT OF THE AGGREGATE LIMIT OF LIABILITY UNDER ANY OPTIONAL EXTENDED REPORTING PERIOD UNLESS SPECIFIC STATE LAW REQUIRES SUCH REINSTATEMENT.

WARNING: ANY PERSON WHO KNOWINGLY, AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY.

In the event you need to contact someone about this policy for any reason please contact your agent. If you have additional questions, you may contact the insurance company issuing this policy at the following address and telephone number:

CHICAGO INSURANCE COMPANY
Professional Liability Department
55 E. Monroe St., Chicago, IL 60603
Phone: (312) 346-6400

If you have been unable to contact or obtain satisfaction from the company or the agent, you may contact your State Insurance Department:

Written correspondence is preferable so that a record of your inquiry is maintained. When contacting your agent, company, or the State Insurance Department, have your certificate number available.

INTERSTATE INSURANCE GROUP IN ALASKA: All return premiums will be computed pro-rata.

Pursuant to the Alaska Division of Insurance, we must provide to you and comply with the following notice: Your policy contains a provision relating to "Other Insurance". If any other valid insurance is primary, and permits contributions by equal shares, we will follow this method also. Under this approach, each insurer contributes equal amounts until it has paid is applicable limits of insurance or none of the loss remains, which ever comes first.

IN ARKANSAS, contact:

Consumer Services Division 1123 South University 400 University Tower Building Little Rock, Arkansas 72204

Phone: (501) 686-2945

IN INDIANA:

Should you have a valid claim and feel you are not being treated fairly, you may contact the Indiana Department of Insurance at the address and phone number below with your complaint and seek assistance from the governmental agency that regulates insurance.

Public Information/Market Conduct Indiana Department of Insurance 311 West Washington Street, Suite 300 Indianapolis, IN 46204-2787

Phone: Consumer Hotline: In Indianapolis area:

1-800-662-4461

1-317-232-2395

IN NORTH CAROLINA:

Within 45 days after receipt of a written request from the Named Insured the Company shall mail or deliver loss information on open and closed claims covering a three-year period. In the event of policy cancellation or nonrenewal, the Insured may elect to purchase coverage for the extending reporting period. The Insured may choose a limit of liability in the policy aggregate for the extended reporting period which is one hundred percent (100%) of the expiring policy aggregate that was in effect at the inception of the policy.

IN TEXAS: COMPLAINT NOTICE:

Should any dispute arise about your premium or about a claim that you have filed, contact the agent or write to the company that issued the policy or certificate. If the problem is not resolved, you may also write the State Board of Insurance, P.O. Box 149091, (333 Guadalupe), Austin, Texas 78714-9091, Fax# (512) 322-3550. This notice of complaint procedure is for information only and does not become a part or condition of this policy or certificate. Please be advised that the insurance company issuing your policy may not be subject to all insurance laws and regulations of the State of Texas.

FOR INFORMATION, OR TO MAKE A COMPLAINT, CALL: 1-800-628-8574

IN VIRGINIA, contact:

State of Virginia Bureau of Insurance Property & Casualty Division

P.O. Box 1157

Richmond, Virginia 23209

Phone: (In-state toll free):

1-800-552-7945

(Out-of-state calls):

1-804-786-3741

IN WEST VIRGINIA, contact:

Consumer Service Division

West Virginia Insurance Department

P.O. Box 50540

Phone: (in-state toll free):

1-800-642-9004

(Otherwise)

1-304-558-3386

Charleston, W. Virginia 25305-0540

IN WISCONSIN:

PROBLEMS WITH YOUR INSURANCE? - If you are having problems with your insurance company or agent, do not hesitate to contact the insurance company or agent to resolve your problem. You can also contact the OFFICE OF THE COMMISSIONER OF INSURANCE, a state agency which enforces Wisconsin's insurance laws, and file a complaint. You can contact the OFFICE OF THE COMMISSIONER OF INSURANCE by writing to:

OFFICE OF THE COMMISSIONER OF INSURANCE

Complaints Department P.O. Box 7873 Madison, WI 53707-7873

or you can call 1-800-236-8517 outside of Madison or 266-0103 in Madison and request a complaint form.

PON-2003 (08/02)

Page 2 of 2

Appendix T

Student Evaluation Procedure

- 1. During the 3rd week of the term, the Office of Instruction will send a list of part-time faculty to the division directors/ directors who will select the part-time faculty that need to be evaluated during the term. The division directors are responsible for returning this list to the Office of Instruction by the 5th week of the term.
- 2. The Office of Instruction will prepare the individual evaluation packets and send to the division director/directors of full-time or part-time faculty with the exception of Outreach, the Adult Learning Skills Program (ALSP) and Curry County. Outreach, Curry County and ALSP will receive a box of packets, from the Office of Instruction, that they will be responsible for distributing to the faculty they supervise. Non-credit Outreach courses may be evaluated using a continuing education evaluation form, distributed and maintained in Outreach.
- 3. The Office of Instruction will send student evaluations to the full and part-time faculty during the 8th week of the term. They will use color-coded, individualized memoranda as provided by the appropriate division director. The memorandum to the student monitor will also be color-coded and will be stapled to the front of each packet. The memorandum from the Dean of Instructional Services will be color-coded and placed on top of all of the packets. In the case of short-term courses the division director/director will be responsible for getting the evaluation packets to the instructor. COLOR-CODES: Outreach Buff, Collegiate Ed Salmon, Health & Human Services Yellow, ALSP Blue, Bus & Tech Green
- 4. The evaluations will be returned to the 2nd floor of the library in Tioga Hall by the student monitor. The library will provide a locked box located on the 2nd floor counter that the evaluations will be placed in. The library staff will place the evaluations in the appropriate division director's mailbox, based on color-coding.
- 5. The Office of Instruction will type the comments for Collegiate Education and the Adult Learning Skills Program. Outreach and Curry will be responsible for typing their comments. The division director's secretaries will type the comments for the Business and Technology and the Health and Human Services Divisions. The division director's secretaries will track the evaluations and ensure that they have been returned. The support staff will be responsible for electronically transferring the information to the Office of Instruction. Support staff will turn off the spell checker and type the comments EXACTLY as the student writes them.
- 6. The Office of Instruction will scan the forms and match them with the comments. Two copies of the evaluation will be sent to the Division Director and one copy will be sent to the appropriate Associate Dean.
- 7. The student evaluations will be completed by the 10th week of the term.
- 8. The student evaluations and comments will be sent to the faculty after grades are submitted at the end of the term.
- 9. Division directors/directors will maintain hard copy files by instructor in a secure space. Curry records will be located and stored by the Associate Dean in Curry County.

Revised 10/29/02

SOUTH OREGO COMM

instructor's Name__

IWESTERN ON IUNITY COLLEGE

Rating Scale: A. Always True

COURSE RATING FORM

	='							B. Otten True
Co	ourse	Numb	er					C. Sometimes True D. Seldom True
C E								F Nover True
Da	ate _							F. Not Enough Information
								NA. Not Applicable
1	Ā	В	Ċ	D.	Œ.	F	NA	The teacher distributed a course outline which clearly identified the course materia
2	Ā	B	ŢĊ.	(<u>D</u> .	Œ	Œ,	ÑĀ	This course was well organized.
3	. A :	<u>(B</u>	<u>C</u>	Ď	E	Œ	ŅĀ	The teacher clearly explained the grading requirements of this course.
4	<u>Ā</u>	ъĒ	<u>ē</u>	(Ď.	Œ	Ē	ÑĀ	The teacher clearly described the work required of students.
5	Ā	(B)	Ç	Ö.	E	F	ΝA	The teacher met and dismissed class at scheduled times.
6	Ā	€	C	(D	Ē	Œ.	NΑ	Laboratory sessions were coordinated with lectures and class discussions.
7	Ā	В	<u>[</u> C	, D	Œ.	Ē	ŅĀ	The teacher demonstrated the importance and significance of the subject matter.
8	A	B	Ţ	D	Œ.	Ē	ÑΑ	The teacher spoke with expressiveness and variety in tone of voice.
9	Ä.	B.	(0)	ַֿם	Œ.	Œ	ΝĀ	The teacher explained course materials clearly.
10	Α.	<u>(B</u>	(C)	D	Œ	Œ.	ŅĀ	The teacher was aware when students became lost.
11	Α	ĘΒ	· <u>C</u> ;	<u>,</u>	E	F	ÑΑ	The teacher kept students aware of their own progress in the course.
12	Α.	í þ	~~	ſñ	Œ	Œ.	ΝĀ	The teacher encouraged critical thinking and analysis.

16 A B C O E E NA Examinations were returned promptly.

17 A B C D E F NA Examinations were graded fairly and impartially.

16 A B C D E F NA This course has taught me a great deal about the subject matter.

14 À B C D E F NA The teacher was available to provide assistance to students.

■ 15 A B C D E F NA Examination questions were related to the course materials.

19 д в <u>с</u> <u>р</u> Е Е М This course has caused me to want to take another course from this teacher.

PLEASE PLACE COMMENTS ON THE BACK OF THIS FORM.

C D E NA The teacher presented materials in a manner which aided student learning.

A DIALFATE RECEIVE: FORM NO. F-5028-SCCC

P3 5201 | 525 + 54 3 2 1

Appendix U

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Southwestern Oregon Community College EMT Program: Student Clinical/Field Evaluation

In order to ensure that our EMT program provides the very best training, the college is interested in obtaining information about our student's performance during their clinical observation and ambulance time. After the student has completed their time with your agency, please take a few moments to answer the following questions. Return this form to: Robbie Kirch, SWOCC, 1988 Newmark, Coos Bay OR 97420.

Did the student arrive on time? Do you feel this student was prepared for their field time? Was this student professional in their behavior while they were at your site? Was this student dressed appropriately? Was this student cooperative and willing to do as directed? Did this student appear to be interested in the activities of the organization? Did this student voluntarily apply themselves to help where able? Did this student listen to instructions and act accordingly? Do you have additional comments regarding the student? Student Name: _Date:_____ Clinical/Ambulance Name:_____ Evaluated By (Optional)_____

Southwestern Oregon Community College Follow-Up Evaluation for First Responder, EMT-Basic and EMT-Intermediate Students

The College is interested in obtaining information from previous EMT students to ensure that our EMT program fulfills our students needs. Would you please take a few moments to answer the following questions.

1.	Current Job Status:
2.	How are you currently utilizing your EMT-Basic/Intermediate certification?
	Volunteer Agency: Paid Professional:
3.	Do you plan to further your education in the field of Emergency Medical Services?
	Yes: No:
	If yes what are your future plans?
4.	Do you feel that the instruction that you had at Southwestern provided you with the necessary skills to enable you to take the National/State written examination?
	Yes: No:
	How do you think instruction could have been improved?
5.	Do you feel that the instruction that you had provided you with the necessary skills to take the State practical examination?
	Yes: No:
	How do you think instruction could have been improved?
6.	Do you feel that the instruction that you had provided you with the necessary skills to practice as an EMT in the capacity that you fill now?
	Yes: No:
	How do you think instruction could have been improved?
7.	Do you have any other comments or suggestions regarding the EMT program at Southwestern:
	Instructor: Year:
8.	Instructor: Year:
Pleas	se return this questionnaire to: Robbie Kirch, Public Safety Training and Education Department, 1988 Newmark, Coos Bay, Oregon 97420.

Southwestern Oregon Community College EMT Program: Field Experience Site Evaluation

In order to ensure that our EMT program provides the very best training, the College is interested in obtaining information from the sites that our students have utilized for their clinical observation and ambulance time. Would you please take a few moments to answer the following questions.

Do you	feel our students w	ere prepared for their	field time?	
	Yes:	No:	_	
Vere o	our students profess	ional in their behavior	r while they were at your site?	
	Yes:	No:		
Were o	our students dressed	d appropriately for the	eir field work?	
	Yes:	No:		
	•		e the proper attire for future students:	
				_
	How do you think in	nstruction or training o	could be improved?	
				<u> </u>
		nd communication bet	ween your agency, EMT program admi	nistration and
	Yes:	No:		
	If not, what would	you suggest to improv		
			ggestions regarding the EMT program a	at —
				

Please return this questionnaire to: Robbie Kirch, Public Safety Training and Education Department 1988 Newmark, Coos Bay, Oregon 97420.

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Southwestern Oregon Community College EMT Program: Agency Evaluation

In order to ensure that our EMT program provides the very best training, the College is interested in obtaining information from agencies in the school district who have employees/volunteers that are certified as Emergency Medical Technicians. Due to budget cuts we would also like you to indicate the number of individuals in your department that are interested in the EMT classes. Would you please take a few moments to answer the following questions.

1.	Current Number of First Responder employees/volunteers?
	Number of First Responders who took the class at Southwestern?
	Number of individuals who are interested in taking this class in the Fall, 2004?
2.	Current Number of EMT-Basic employees/volunteers?
	Number of EMT-Basics who took the class at Southwestern?
	Number of individuals who are interested in taking this class in the Fall, 2004?
3.	Current Number of EMT-Intermediate employees/volunteers?
	Number of EMT-Intermediate who took the class at Southwestern?
	Number of individuals who are interested in taking this class in the Fall, 2004?
4.	Current Number of EMT-Paramedics employees/volunteers?
5.	Do you feel that your EMT's have had the level of instruction and training necessary to perform in their capacity of EMT's.
	Yes: No:
	How do you think instruction or training could be improved?
6.	Do you have any other comments or suggestions regarding the EMT program at Southwestern:

Please return this questionnaire to: Robbie Kirch, EMT Program, SOCC, 1988 Newmark, Coos Bay, Oregon 97420.

Appendix V

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