



ST. JOHN'S UNIVERSITY

EMERGENCY MEDICAL SERVICES INSTITUTE

PARAMEDIC ORIGINAL COURSE 27

PRE-ADMISSIONS PACKET

REGISTRATION ENDS:	JANUARY 22, 2020
MANDATORY ORIENTATIONS:	FEBRUARY 26, 2020 & MARCH 4, 2020
CLASSES BEGIN:	APRIL 27, 2020
NYS WRITTEN EXAM:	MARCH 18, 2021



ST. JOHN'S UNIVERSITY

College of Pharmacy and Health Sciences

Dear Prospective Paramedic Student,

Congratulations and thank you for choosing St. John's University. Our nationally accredited paramedic program is designed to allow you the opportunity to receive the training and education necessary to become a competent entry-level paramedic.

At this point, you have submitted the non-refundable \$200 application fee along with copies of your NYS EMT card, driver's license or photo ID and your highest educational diploma or transcript. A seat in POC 25 has been reserved for you.

In order to assist you with the continuing process of registration and clearance to start POC 27 we have produced this pre-admission package and checklist that will hopefully guide you through all the medical and administrative forms necessary to begin the program. Also in the package is information on obtaining your criminal background check and drug screening. Please note the dates on most of these items require them to be done **AFTER** January 1, 2020 so that they are within the acceptable timelines set forth by the University and our clinical/field affiliates. Try and schedule your medical and drug screening appointments as soon after January 1, 2020 as possible as some of you may need time for boosters or additional vaccinations to meet the requirements. We must have copies of your blood labs to accompany your physical exam report. Also please do not start background checks until after January 1, 2020 as the results must be dated within six (6) months of beginning rotations which will be in June/July 2020. In the past some students have found it difficult to find/obtain childhood vaccination records for MMR and Varicella so start that process now.

If you have any questions please do not hesitate to contact us. The best way to do that is via email so that we can document and process any questions or concerns you might have and assist you as best we can in continuing our registration process.

We look forward to meeting you and having you as a student at St. John's University.

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ADMISSION PROCESS

The SJU EMS Institute is committed to training a highly qualified workforce that reflects the diversity of the New York metropolitan region. All applicants will receive consideration without regard to race, color, national origin, sex, age, political affiliation, non-disqualifying physical handicap, sexual orientation, and any other non-merit factor.

Documentation of Program Eligibility to Be Provided At Start of Course

Course registration closes on **Wednesday, January 22, 2020.**

If you have not previously furnished these materials, you must do so by **Wednesday, January 29, 2020.**

1. **Paramedic on-line course application.**
2. Payment of \$200 **NON-REFUNDABLE** application fee. Payable via money order or bank check only made out to St. John's University.
3. **EMT Certification:** Provide a copy of your current New York State EMT certification. NYS EMT certification must be maintained throughout Paramedic education program or the student will be dismissed.
4. **High school diploma, certifications of completion, GED, or transcripts, and college transcripts:** provide copies of all applicable documents
5. **Valid Driver's License, State Issued Identification Card or Valid Passport:** Provide copy. If you do not have either of these, other government issued photo IDs will be accepted.

If you have not previously furnished the following materials, you must do so by **Friday, February 21, 2020. Students not submitting these documents by this date will not be allowed to enter the program.**

1. **Third Party Background and Drug Panel Screening:** All candidates must pass a background check and drug screening administered by an independent third party. This must be done **AFTER Wednesday, January 1, 2020.** The cost of this check and screening will be the responsibility of the student. Any positive results on the drug screening will be grounds for denial of admission. Any positive results on the background investigation will be reviewed by the program director. The link to the background check/drug screening is <https://portal.castlebranch.com/sf72>
2. **Health Insurance:** Students must maintain private health insurance or worker's compensation insurance throughout the Program, and furnish proof thereof. Students are responsible for all payment for medical care related to exposure/ injuries/illnesses.
3. **Proof of successful passage of a basic physical examination conducted AFTER Wednesday, January 1, 2020.** Physical **MUST** be in the same calendar year the course begins not more than 3 months from the start of the course. The SJU Physical Examination Report must be signed by a physician and specify that you have no physical limitations that would impede your participation in the Program, including eligibility to be mask fit tested.

Documentation of the following immunizations: **MUST PROVIDE TITERS/LAB RESULTS**

- Hepatitis B Surface antibody. **Blood titer result mandatory**
 - Hepatitis C. **Blood titer result mandatory**
 - Measles, Mumps and Rubella (MMR): **Blood titer result mandatory**
 - Tuberculosis: Within last 6 months a QFT TB Gold test or if positive a chest x-ray and results within the last year. **QFT TB Gold test is mandatory**
 - Tetanus vaccine within ten years or titer.
 - Varicella vaccine or immunity following disease. **Blood titer result mandatory and proof of two (2) vaccinations and/or proof of disease**
 - Diphtheria (tDAP) vaccine or titer.
 - Influenza vaccine for 2019-2020 strain. *Please note you will be required to receive the vaccine for the 2020-2021 strain when it becomes available.* Proof must be submitted by **Wednesday, September 16, 2020** or the student cannot attend class/lab/rotations until receiving vaccination.
4. **Complete a SJU Meningitis Form:** Form shall be completed by each candidate.
 5. **Professional Liability Insurance:** Students must maintain professional liability insurance for paramedic students throughout the Program, and furnish proof thereof to the clinical rotation sites through the clinical coordinator. Proof of professional liability insurance is due no later than the first day of class, **Monday, April 27, 2020.**

About CastleBranch.com

CastleBranch.com is a service that allows students to order their own background checks online. Information collected through CastleBranch.com is secure, tamper-proof and kept confidential. St. John's University - Emergency Medical Services has partnered with CastleBranch to provide you a secure account to manage your time sensitive school and clinical requirements. After you complete the order process and create your account, you can log in to your account to monitor your order status, view your results, respond to alerts, and complete your requirements.

Before Placing Your Order

> Required Personal Information

- In addition to entering your full name and date of birth, you will be asked for your social security number, current address, phone number and email address.

> Drug Test (LabCorp)

- After you place your order, you will receive an email directly from the lab with the subject line: "LabCorp" within 24-48 hours. This email will explain where you need to go to complete your drug test and contain the electronic form required for the drug test.

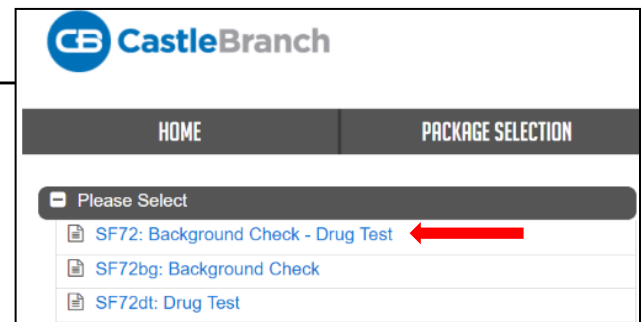
> Payment Information

- At the end of the online order process, you will be prompted to enter your Visa or MasterCard information and be billed **\$175.00** (as of 07/22/19). Money orders are also accepted but will result in a \$10 fee and an additional turnaround time.

Place Your Order

Go to: <https://portal.castlebranch.com/SF72>
Click on "Place Order" and select:

SF72: Background Check - Drug Test



View Your Results

After placing your order on CastleBranch.com, you will receive a confirmation email that will contain the password needed to access your results and view any missing information required to process your order.

Although 95% of background check results are completed within 3-5 business days, some results may take longer. To see your order status, return to CastleBranch.com with your password. Your order will show as "In Process" until it has been completed in its entirety. Your school's administrator can also securely view your results online with their unique username and password.

For additional assistance, please contact the Service Desk at 888-723-4263 or visit <https://mycb.castlebranch.com/help> for further information

PARAMEDIC ORIGINAL COURSE UNIFORM REQUIREMENTS

Students are required to be in appropriate St. John's University EMS Institute student uniform while in lecture, lab, exam and field (ambulance) rotations. They must be dressed in a professional business casual manner while they are doing clinical (hospital) rotations. Lab coats MUST be worn at all times while on clinical (hospital) rotations.

All uniform items must be clean, neat and presentable. THE INDIVIDUAL PRECEPTOR HAS THE RIGHT TO SEND THE STUDENT HOME IF HIS/HER APPEARANCE IS NOT PROFESSIONAL AND MEETING ACCEPTABLE STANDARDS.

CLINICAL ROTATIONS – All rotations **except** ambulance rotations.

- Business Casual attire to include:
 - Males: Button-down long or short sleeve shirt tucked in the pants. No ties
 - Women: Appropriate business shirt / blouse with sleeves
 - Both: Dress slacks with appropriate belt. Neat, clean and in good repair. No jeans, BDU or “work” pants.
- No more than the top shirt button shall be open on all shirts.
- Polished, clean shoes with heels not greater than 1 inch and socks must be worn.
- All black or white sneakers may be worn. Must be clean, professional “work type” sneaker. All sneakers must be approved by the clinical coordinator prior to the student wearing them to clinical rotations.
- No sandals, wedges or open toe shoes are permitted.
- Short, white lab coat with current SJU EMS Institute embroidered identification logo.
- SJU ID card on outermost garment at all times along with hospital ID if required.

Prohibited Items

- Any facial hair below the lower lip or which would interfere with N95 mask seal. This is an OSHA and JCAHO requirement. Students must comply and will be fit tested for N95 masks.
- Dangling jewelry including necklaces, bracelets or earrings.
- No visible body piercings except appropriate stud earrings.
- No hats worn inside except required religious head coverings.
- Fingernails should be clean and neatly trimmed no greater than ¼ inch so as not to interfere with patient care. Wraps, acrylic and extensions are not permitted. Fingernails must comply with clinical site and/or JCAHO standard.

FIELD ROTATIONS – BLS and ALS ambulance rotations only

- SJU EMS Institute embroidered shirt.
- Navy blue pants and black leather belt (EMS/BDU style pants may only be worn in class and on field rotations)
- Polished, clean black boots and socks. NO sneakers or shoes are permitted on field rotations.
- Ambulance rotations require each student to have with them an ANSI II reflective vest.

Optional

- SJU EMS Institute sweatshirt.
- SJU EMS Institute jacket.
- SJU EMS fleece hat or baseball style cap only.
- Navy blue or black turtleneck may be worn **UNDER** EMS Institute shirt.

Outermost garment at all times must identify the individual as a St. John's Paramedic Student

Uniforms must be ordered on first orientation day and paid for by second orientation day.

NO REFUNDS are possible for ordered uniform items since they are ordered individually for each student and embroidered.



EMS Institute

Clinical Experience Sheet

Name: _____

(PLEASE PRINT)

Email Address: _____

(PLEASE PRINT)

Current NYS Certification: EMT AEMT-CC Expiration Date: _____

What Year Did You Complete Your Original EMT Program? _____ If it was 2019 what month? _____

YEAR

MONTH

Where Did You Take Your Original EMT Program?

LOCATION

INSTRUCTOR COORDINATOR

Have you ever been enrolled in any previous paramedic programs? (Yes/No) _____

If YES, Where/When? _____

If YES, Why did you leave? _____

How many months or years of ambulance experience do you have and where?

911 Career _____ Where: _____

Years / Months

911 Volunteer _____ Where: _____

Years / Months

Transport / Private _____ Where: _____

Years / Months

Additional EMS Experience (military, nursing, allied health): _____

Bring this Orientation Day 1 02/26/19



Emergency Medical Service Institute
175-05 Horace Harding Expressway Fresh Meadows, New York 11365
(718) 990-8418

Professional Liability Insurance

ST. JOHN'S UNIVERSITY DOES NOT RECOMMEND, ENDORSE OR HAVE ANY AFFILIATION WITH ANY OF THESE COMPANIES, THEIR AGENTS OR THEIR PRODUCTS. PROFESSIONAL LIABILITY INSURANCE (MALPRACTICE INSURANCE) IS REQUIRED BY OUR CLINICAL AFFILIATES AS A CONDITION FOR USE OF THEIR FACILITIES FOR CLINICAL AND FIELD ROTATIONS. THE COMPANIES LISTED ARE JUST A REFLECTION OF COMPANIES THAT PREVIOUS STUDENTS HAVE USED FOR PROFESSIONAL LIABILITY INSURANCE.

St. John's University has previously made available a group policy for professional liability at a discounted rate. This policy and specific information will not be available until Orientation Day 1, 02/26/20.

Make sure your purchase a policy that covers you through February 11, 2021 and as a **PARAMEDIC STUDENT**. There are multiple policies for professional liability insurance and student policies are usually cheaper. Speak with someone at the agency before purchasing if you have any questions.

Healthcare Providers Service Organization (HPSO)

<http://www.hpso.com/>

CM&F Group, Inc.

<https://www.cmfgroup.com/coverages/allied-health?p=paramedic>

Granite State Insurance Company

http://www.aig.com/Healthcare-Industry_3171_418483.html

WHICHEVER COMPANY YOU CHOOSE, YOUR CERTIFICATE OF LIABILITY COVERAGE MUST SAY **PARAMEDIC STUDENT** ON IT.



Physical Examination

To be completed by **Physician** or **Health Care Provider**. Please make a copy for your files.

EMS Institute Office:

175-05 Horace Harding Expressway Fresh Meadows, NY 11365 718-990-8436

Student Name _____ Date of Birth _____

X Number _____ Gender: Male Female

PHYSICAL EXAMINATION Height _____ Weight _____ Blood Pressure _____ Pulse _____

Color Vision Screening: Normal Abnormal

Urinalysis Result: Normal Abnormal Date ____/____/____

Blood Count: HCT _____ HGB _____ Date ____/____/____

	Normal	Abnormal		Normal	Abnormal
Head, neck, face and scalp	<input type="checkbox"/>	<input type="checkbox"/>	Abdomen	<input type="checkbox"/>	<input type="checkbox"/>
Nose and sinuses	<input type="checkbox"/>	<input type="checkbox"/>	Endocrine System	<input type="checkbox"/>	<input type="checkbox"/>
Mouth, teeth, gingival	<input type="checkbox"/>	<input type="checkbox"/>	Extremities	<input type="checkbox"/>	<input type="checkbox"/>
Ears	<input type="checkbox"/>	<input type="checkbox"/>	Reflexes	<input type="checkbox"/>	<input type="checkbox"/>
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>
Lungs, chest and breasts	<input type="checkbox"/>	<input type="checkbox"/>	Lymphatic	<input type="checkbox"/>	<input type="checkbox"/>
Heart	<input type="checkbox"/>	<input type="checkbox"/>	Neurologic	<input type="checkbox"/>	<input type="checkbox"/>
Vascular	<input type="checkbox"/>	<input type="checkbox"/>	Genito/Urinary	<input type="checkbox"/>	<input type="checkbox"/>

In your judgment, is there any reason why strenuous physical activities would be contradicted? Yes No

If yes, explain _____

Family history(relevant health problems) _____

VACCINE RECORD- blood titers must be drawn and lab results must be attached

Tetanus-Diphtheria Booster: (within 10 years) Date _____ Tdap Date _____

TB Screening (Attach copy of laboratory results)

QTF TB Gold Test Date _____ Immune ___ Negative (If QTF Gold test is positive a chest x-ray is required)

Meningococcal Vaccine (recommended after 16th birthday): Date _____ or Refused ___ Attach Meningitis Form

Immunity to Rubeola (Attach copy of laboratory results)

Rubeola Antibody Titer Date _____ Immune ___ Not Immune Immunization Given _____

Immunity to Mumps (Attach copy of laboratory results)

Mumps Antibody Titer Date _____ Immune ___ Not Immune Immunization Given _____

Immunity to Rubella (Attach copy of laboratory results)

Rubella Antibody Titer Date _____ Immune ___ Not Immune Immunization Given _____

Immunity to Varicella (Attach copy of laboratory results)

Varicella Antibody Titer Date _____ Immune ___ Not Immune Immunization Given _____

Immunity to Hepatitis C Ab (Attach copy of laboratory results)

Hepatitis C Ab Titer Date _____ Immune ___ Not Immune Immunization Given _____

Immunity to Hepatitis B Surface Antibody (Attach copy of laboratory results) or Refused _____ Sign Form

Hepatitis B Titer (Required) Date _____ Immune _____ Not Immune _____ Immunization Given _____

HEPATITIS B VACCINE STUDENT DECLINATION

I have been informed that I should take a series of three Hepatitis B vaccines under the OSHA guidelines. I must arrange for this series on my own through my primary health care provider.

I **DECLINE** to take these vaccines, and do so **AT MY OWN RISK**, and release St. John's University, all of its employees and the clinical hospital and/or ambulance affiliates of all liabilities and personal responsibilities.

Print Student Name _____

Student Signature _____

Date _____

HEALTHCARE PRACTITIONER CERTIFICATION

TO THE BEST OF MY KNOWLEDGE, THE ABOVE NAMED STUDENT IS FREE FROM PHYSICAL AND MENTAL IMPAIRMENTS WHICH MIGHT INTERFERE WITH THEIR PERFORMANCE OR IMPOSE A POTENTIAL RISK TO THEMSELVES, PATIENTS, HOSPITAL OR AMBULANCE PERSONNEL. I HAVE PERFORMED A PHYSICAL EXAMINATION OF SUFFICIENT SCOPE TO ENSURE THAT THE ABOVE NAMED PERSON IS FREE FROM HEALTH IMPAIRMENT WHICH IS OF POTENTIAL RISK TO THE PATIENT OR WHICH MIGHT INTERFERE WITH THE PERFORMANCE OF HIS/HER DUTIES, INCLUDING THE HABITUATION OR ADDICTION TO DEPRESSANTS, STIMULANTS, NARCOTICS, ALCOHOL OR OTHER DRUGS OR SUBSTANCES WHICH MAY ALTER THE INDIVIDUAL'S BEHAVIOR (PER N.Y. S. CODE 40S.3(B)).

Print physician/ licensed health care practitioner name _____

NYS License Number _____

Signature _____

Date of Examination _____

Title _____

Address _____

City _____ State _____ Zip _____

Phone _____



STUDENT RELEASE

I authorize the above named physician/ licensed health care practitioner to furnish this form, my health history and my medical records to the course sponsoring agency as required by Title 10 and other governing agencies. I understand that in order to revoke authorization I must do so in writing and that such revocations shall not apply to records to which access has been granted or which have been released to third parties prior to the date of revocation.

Print Student Name _____

Signature _____

Date _____

The information contained on these forms is accessible only to the medical director and professional health staff of the EMS Institute and will not be released without the written authorization of the student or pursuant to a lawfully issued subpoena. The authority to request this information is found in Section 355 of the Educational Law. New York State Public Health Law 2165 requires ALL students attending colleges and universities in New York State who were born on or after January 1, 1957 to be immunized against measles, mumps, rubella and varicella. Documentation of positive titers must be submitted before classes begin. Students who fail to present adequate documentation will not be permitted to register or attend classes or clinical rotations.



Important Meningitis Information

St. John's University is in compliance with New York State Public Health Law 2167, which requires ALL students attending colleges and universities in New York State to be given information relating to immunization against meningococcal meningitis. By law you must respond to this notification within 30 days.

An airborne disease, meningococcal meningitis is transmitted through droplets of respiratory secretions and from direct contact with persons infected with the disease. College students spending many hours together in close physical contact and/or living in confined areas such as residence halls are at an increased risk of contracting the disease.

Meningococcal meningitis causes an inflammation of the membranes covering the brain and spinal cord. It can be treated with antibiotics but is sometimes not diagnosed early enough. Symptoms of the most common type of meningococcal meningitis are high fever, severe headache, stiff neck, nausea and vomiting, lethargy and a rapidly progressing rash. The disease strikes about 3,000 Americans and claims about 300 lives each year. Between 100 and 125 meningitis cases occur on college campuses and as many as 15 students will die from the disease each year. Though it occurs most often in late winter or early spring, it can occur in any season.

A vaccine is available to protect against four types of the bacteria causing meningitis in the United States: types A, C, Y and W-135. These types account for nearly $\frac{2}{3}$ of meningitis cases among college students. The vaccine does not protect against all strains of the disease and does not provide lifelong immunity. To help you make an informed decision about being immunized, talk with your health care provider to consider the benefits and risks of meningococcal meningitis immunization.

Though Student Health Services does not provide the vaccine on-campus, we can refer students to local health care providers if requested. The cost of the vaccine varies, but in our area the approximate cost is about \$100 – \$200. Be advised that insurance may not pay for the cost of the vaccine.

For your information, we enclose a fact sheet about meningitis provided by the New York State Department of Health. After reading the fact sheet and consulting with your health care provider, please complete the form we provide and return it to this office. You may also fax the form to the number provided.

Thank you for taking the time to consider this important information about meningococcal meningitis and the available vaccine.

Meningococcal Disease Information Sheet

Information for College Students and Parents of Children at Residential Schools and Overnight Camps

What is meningococcal disease?

Meningococcal disease is a severe bacterial infection of the bloodstream or meninges (a thin lining covering the brain and spinal cord).

Who gets meningococcal disease?

Anyone can get meningococcal disease, but it is more common in infants and children. For some college students, such as freshmen living in dormitories, there is an increased risk of meningococcal disease. Between 100 and 125 cases of meningococcal disease occur on college campuses every year in the United States; between five and 15 college students die each year as result of infection.

Currently, no data is available regarding whether children at overnight camps or residential schools are at the same increased risk for disease. However, these children can be in settings similar to college freshmen living in dormitories. Other persons at increased risk include household contacts of a person known to have had this disease, immuno-compromised people and people traveling to parts of the world where meningitis is prevalent.

How is the meningococcus germ spread?

The meningococcus germ is spread by direct close contact with nose or throat discharges of an infected person. Many people carry this particular germ in their nose and throat without any signs of illness, while others may develop serious symptoms.

What are the symptoms?

High fever, headache, vomiting, stiff neck and a rash are symptoms of meningococcal disease. Among people who develop meningococcal disease, 10 – 15 percent die in spite of treatment with antibiotics. Of those who live, permanent brain damage, hearing loss, kidney failure, loss of arms or legs or chronic nervous system problems can occur.

How soon do the symptoms appear?

The symptoms may appear two to 10 days after exposure, but usually within five days.

What is the treatment for meningococcal disease?

Antibiotics, such as penicillin G or ceftriaxone, can be used to treat people with meningococcal disease.

Is there a vaccine to prevent meningococcal meningitis?

Yes, a safe and effective vaccine is available. The vaccine is 85 percent to 100 percent effective in preventing four kinds of bacteria (serogroups A, C, Y, W-135) that cause about 70 percent of the disease in the United States.

Is the vaccine safe? Are there adverse side effects to the vaccine?

The vaccine is safe, with mild and infrequent side effects such as redness and pain at the injection site lasting up to two days.

What is the duration of protection from the vaccine?

After vaccination, immunity develops within seven to 10 days and remains effective for approximately three to five years. As with any vaccine, vaccination against meningitis may not protect 100 percent of all susceptible individuals.

How do I get more information about meningococcal disease and vaccination?

Contact your family physician or your student health service. Additional information is also available on the Web sites of: the New York State Department of Health, www.health.state.ny.us; the Centers for Disease Control and Prevention, www.cdc.gov/ncid/dbmd/diseaseinfo; and the American College Health Association at: www.acha.org



Meningitis Form

(Please retain a copy for your files.)

Student Health Services

Queens and Manhattan Campuses
8000 Utopia Parkway
Queens, NY 11439
Tel (718) 990-6360
Fax (718) 990-2368
www.stjohns.edu

Staten Island Campus
Campus Center
300 Howard Avenue
Staten Island, NY 10301
Tel (718) 390-4447
Fax (718) 390-4480

Name: _____ Date of Birth: _____

Address: _____

Student ID #: _____

St. John's University is in compliance with New York State Public Health Law 2167, requiring all college and university students and parents or guardians (if student is under age 18) to complete and return this form to Student Health Services at the address above.

All students (and parents or guardians if student is under age 18) must complete and sign below. Please note: It is necessary to complete this form even if documentation of this vaccine is already on file.

CHECK ONE BOX AND SIGN BELOW:

I have (for students under age 18: "My child has"):

Had the meningococcal meningitis vaccine. Date: _____

Health Care Provider's signature: _____

Address: _____

License #: _____ Tel: _____

Stamp: _____

Read, or have had explained to me, the information regarding meningococcal meningitis disease. I understand the risks of not receiving the vaccine. I have decided that I (my child) will not obtain immunization against meningococcal meningitis disease.

Signed: _____ Date: _____

(Parent/guardian if student is under age 18)



Student Authorization for Access to Records by Third Parties

I hereby authorize the Medical Director of the St. John's University EMS Institute, and his staff to grant access to and/or release the following materials relating to me:

Findings of physical examination and vaccination/immunity status

Contained in my student medical files to all St. John's University EMS Institute clinical and field affiliates where I may be participating in rotations for the purpose of medical clearance by that affiliate in order to be eligible to participate in clinical and/or field rotations at their site

I understand that in order to revoke this authorization I must do so in writing and that such revocation shall not apply to records to which access has been granted or which have been released to third parties prior to the date of revocation.

Name (Please Print)

Address

Signature

City

State

Zip

Date

Student ID # (X number)

Frequently Asked Questions

FIRST DAY

What is orientation?

Wednesday, February 26, 2020 from 9am – 5pm is academic orientation. You will be introduced to your core staff and administration. We will be doing NYS and SJU registration paperwork. We will be reviewing academic policies and procedures. We will review the learning management site, JB Learning, with you. You will tour the building. You will order uniforms, have your picture taken and we will answer questions.

Wednesday, March 4, 2020 from 9am – 5pm is your clinical/field orientation. We will go over rotation requirements and skills competencies. Review the clinical guidelines, policies and procedures. Review FISDAP. Both days of orientation are mandatory if you want to be in the program. If you miss either day you cannot participate in this program.

Monday, April 27, 2020 at 9am is your first day of class.

What do I bring to orientation?

1. Bring a pen and number 2 pencil.
2. Bring some paper or a notebook to take notes on.
3. You need your Clinical Experience sheet which is in this package
4. Your uniform order form (will be emailed to you 1 week before academic orientation)
5. The \$1000 non-refundable down payment is due **Wednesday, February 26, 2020** to begin registration. Must be money order or bank check only.

What do I wear to orientation?

Until uniforms come in you will wear casual business attire. That means **NO** jeans, shorts, t-shirts or sneakers. A button down or polo shirt and slacks and shoes is usually what that means. Google it if you have any questions and don't know what casual business attire is. No dresses, jackets or ties. You just need to be neat, professional and comfortable.

What about tuition payments?

By **Wednesday, February 26, 2020**, you must have paid a minimum of \$1000 deposit, **which is non-refundable**, and if you are going into the payment plan you must register online by 04/24/20. The payment options will be explained at the academic orientation. The \$1000 will be deducted off your total tuition. Tuition payment options include either full payment or enrollment in the payment plan by **Friday, April 24, 2020**.

Do we order uniforms at orientation?

YES! We need to order them as soon as possible. There will be select sizes for you to try on. Please review the uniform order form that will be sent to you and bring it to orientation on **Wednesday, March 4, 2020**. Uniform orders are custom embroidered for us. Depending on the size of the order, production usually takes 3-4 weeks so we will start classes by wearing casual business attire until the uniforms come in. Once uniforms arrive, they will be distributed and you will be required to wear them to all lectures, labs, exams and field rotations.

TEXTBOOKS

Do I have to order textbooks in the bundle from the publisher?

The simple answer is no, we cannot require you to order the book bundle. All we can do is offer you the experiences of previous students. Students in POC 24, 25 and 26 bought used books and some books through Amazon. Some of these books did **not** include the key codes for JB Learning Management System which is required. The books also had trouble shipping and the students had to eventually order the publisher's bundle in order to get the required material for the course. This ended up costing them more in the long run.

Are there books that are required and optional books?

Yes, there are required books that you will need either as reference or as reading assignments. You need these before the class because there is an assignment due the first day of class (Online Anatomy & Physiology program). The required books are all available directly from the publisher at a discounted price or as part of a book bundle. There are a host of other books we can recommend if you need additional help with a particular topic. We can recommend books on pharmacology, drug math, respiratory and airway management and EKG just to name a few topics. If you are having difficulty we can recommend other acceptable titles and authors for you. We suggest that you look at getting a good medical dictionary like Taber's Encyclopedic Medical Dictionary or Mosby's Dictionary of Medicine, Nursing and Health Professions. Also, Bates Pocket Guide to Physical Examinations is a book that many students find very helpful. If you want additional titles or ISBN numbers see us at orientation.

Is there a package for the AHA books?

There is no specific package for the AHA books (CPR, ACLS, PALS). In 2015 the AHA has changed all their material. You will need to order all books that have the new 2015 AHA standards (***please be advised that the next AHA review is in 2020 and may require you to get new books based on those standards***). You need the BLS books for CPR refresher and the ACLS and PALS online course later in the program. Since we are an AHA Training Center we can order these books at a discount so we can take a class order if the students want.

COMPUTER ACCESS

Is there WiFi in the building?

Yes. The WiFi is St. John's restricted meaning there are restrictions set up by SJU IT Dept. in order to get it. It's free and your instructors will advise you how to access it.

Can we use laptops in class?

We have found social media including Facebook, Instagram and Twitter distracting students and those around them during lectures and that is not acceptable. If an instructor sees you on something other than a class related site during lecture you will be sent home. This goes for any electronic device (phone, tablet, etc). You should not be texting or using social media during class or lab or while on rotations. Please pay attention and do not be a distraction to others. We have a strict social and electronic media policy which will be reviewed with you during orientation.

CLINICAL ROTATIONS

Where can I do my clinical rotations?

We have clinical (hospital-based) affiliations set up with the following hospitals to meet various clinical requirements (please note that not all rotations are available at every clinical site, a list will be provided to you prior to selecting rotations).

- New York Presbyterian Queens
- Flushing Hospital Medical Center
- NYU-Winthrop Hospital
- Nassau University Medical Center
- Northwell Health – Southside Hospital
- Northwell Health – J.T. Mather Hospital

Where can I do my field rotations?

We have field (ambulance) affiliations set up with the following agencies to meet your BLS and ALS ambulance requirements. Please note that you cannot do field rotations with an agency where you volunteer or are employed.

- Medi-Sys
 - Jamaica Hospital EMS
 - Flushing Hospital EMS
- Senior Care EMS
 - Brooklyn Hospital
 - Kingsbrook Jewish Hospital EMS
 - Beth Israel Hospital EMS
 - St. Barnabas Hospital EMS
- Empress EMS
 - Montifiore Hospital EMS
 - Westchester Square Medical Center EMS
 - White Plains EMS
 - Mt. Vernon EMS
 - Yonkers EMS
 - New Rochelle EMS
- Brentwood Legion Ambulance

What is FSDAP?

FSDAP is an on-line clinical/field rotation scheduling program. It allows you to select your rotations from the sites we share with other paramedic programs and prevents overbooking and duplication of shifts. FSDAP is included in the price of your JB Learning bundle.

Skills Tracking

We are currently exploring new options and online mobile solutions that will allow you to track your lab, field and clinical skills, competencies and hours on mobile devices (cell phones, tablets). As we get this new technology onboard, you will be provided with additional information.

ATTENDANCE

What do I do if I miss a class?

The Academic policy and procedure addresses this situation and will be reviewed with you during academic orientation. You are allowed 5 days of absences (10 4-hour sessions). There are no excused absences. There are mandatory days where attendance is required to meet the requirements of the program and absence on these days is not allowed under any circumstances.

What do I do if I miss a rotation?

The Academic policy and procedure addresses this situation and will be reviewed with you during clinical orientation. Any missed rotation gets counted towards your cumulative absence total.

ACADEMICS

What do I do if I fail a module exam?

Passing on module exams is 75%. If you get below a 75% on any exam you will be given a chance to review your exam and the opportunity to research the correct answers. You will be allowed to take a retest exam approximately one week later. If you fail that retest exam it is an automatic dismissal from the program.

Do I still have to pay if I drop out or get released for failing academics?

Yes. There is a point where you are entitled to a partial refund if you leave the program voluntarily in good standing. If you are dropped for attendance, academics or clinical reasons then you are not in good standing and are not entitled to any refund. The time limits for partial refund will be gone over with you during orientation. You have to realize that when it comes down to it the University is still running a business and providing you a service. If you go to any college and take a course and end up failing out or getting an F in the course you don't get your money back. All tuition and bills must be paid before you are allowed to take the final exam. Any unpaid tuition bills will be turned over to a collection agency and non-payment can affect your credit rating.

Can I go through the entire course and fail on the last day?

The reality is yes you can and yes, students have done it in the past. It is devastating to think that you can pay a large amount of money for this course and invest 12 months of your time only to fail at the very end. We will try very hard to do our best to make sure this does not happen but it is ultimately your responsibility to do the work and demonstrate to us through passing exams, completing rotation hours and skills competencies that you have the minimum basic knowledge required of an entry level paramedic. This includes both skills and knowledge. The required passing academic average to sit for the course final exam is 75%. At some point you may reach a point where it would be mathematically impossible for you to get a 75% final academic average. If you reach that point you will be released from the program. The whole paradigm based on the National EMS Standard Curriculum is that you demonstrate, and maintain, competency throughout the course.

Paramedic Program Requirement Checklist

Check off each one of these boxes to verify you have all your required paperwork.

- Medical Exam with the following blood lab results: **MUST HAVE COPY OF ACTUAL LAB RESULTS**
 - Hepatitis B Surface Antibody
 - Hepatitis C Antibody
 - Measles IgG (Rubeola) Antibody
 - Mumps IgG Antibody
 - Rubella IgG Antibody
 - Varicella IgG Antibody
 - Quantiferon-Gold TB (if positive test must provide chest x-ray results less than 1 year old)
 - Tetnus vaccine (within last 10 years)
 - Diphtheria (tDAP)
 - Vaccination/Immunization History to show two (2) MMR AND two (2) Varicella vaccinations
- St. John's University Meningitis form
- Background Check
- Proof of personal health insurance
- Clinical Experience Form
- Release of Medical Information Form
- Drug Screening
- Proof of professional liability insurance for
PARAMEDIC STUDENT