

*Jackson County Medical Control Authority*  
**Community Paramedicine Protocols**  
COMMUNITY PARAMEDIC TRAINING PROGRAM

Date: March 2015

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***Community Paramedic Training Program***

**Training Program Components**

- A. Classroom Training - The Community Paramedic (CP) training course (Appendix 1 – Training Curriculum) was developed to provide the CP with training in the following areas:
1. **Expanded Patient Assessment** – The Community Paramedic Unit (CPU) responders may assess the patient in a number of areas including: well person check i.e. immunizations, BP, Cholesterol, BMI, diabetes screening, and home safety evaluation including medication compliance.
  2. **Identify Chronic Debilitative Diseases** – The CP will identify components of chronic disease including: pathophysiology, assessment interim treatment including: COPD/Asthma, CHF, Diabetes/Blood sugar, hypertension, kidney disease/dialysis, neuropathy, Alzheimer's/dementia, decubitus ulceration and skin assessment/foot & wound care).
  3. **Post-Operative Assessment** – The CP will provide post-operative patient assessments for CABG and other conditions. Follow up and assessment may include 12 lead, lung sounds, BP, edema assessment, medication & weight compliance.
  4. **Care and Support of Hospice/Terminally Ill Patients** – Assessment and treatment of these patients.
  5. **Homebound patients with Special Challenges** – Assessment and treatment of patients with challenges related to decreased mobility and inability to get to medical care. Treatments may include: assessment and reinsertion of G-Tubes, Foley catheters, recognition and treatment of UTI's including sepsis.
  6. **Assessment of the Psychiatric/Behavioral Health** – Assessment and treatment of patients with conditions including chronic psychiatric/emotional disorders, acute alcohol withdrawal and depression questionnaire.
  7. **Assess and Treat of Patients with Non-emergent Complaints Without Priority Symptoms** – Symptom and condition evaluation including: nausea and vomiting, upper respiratory infection, tooth pain, kidney stones, febrile seizures and abdominal pain.
  8. **Medication Familiarity** – Recognize commonly prescribed medications, understand how to assess and access their indications, side effects and interactions with other common medications.
- B. **Clinical Experience**
1. Emergency Department - Emphasis on chronic care patients.
  2. ICU - Emphasis on labs, disease process, recovery and discharge.
  3. Hospice - Emphasis on end of life issues including family needs.

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4. Home/Wound care - Emphasis on decubitus ulceration, skin assessment and home care.
  5. Dialysis center - Emphasis on CV complications based on electrolyte imbalance, access sites and complications/infections.
  6. Nephrology care - Emphasis on disease process and end stage renal disease.
  7. Access center - Emphasis on central lines and access ports.

Training will be taught by paramedic instructors, clinical care nurses, specialty care nurses as well as physicians with an expertise in those areas. Clinical time will be done in conjunction with our participating teaching facilities. The curriculum will be reviewed and approved by the CPMP Medical Director and the Medical Control Board.

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Appendix 1 – Training Curriculum

A. Classroom Training

Class	Topic	Study-Exam-Lab Skills	Lecture	Lab
1	Course Introduction & overview Mobile Integrated healthcare CCP State study, jurisdiction, role Established programs Demographics of chronic disease		4	
2	Expanded scope of practice General concepts of disease and diagnosis		4	
3	A&P review Pathophysiology of disease		4	
4	A&P review Pathophysiology of disease		4	
5	Expanded Patient assessment Differential diagnosis	<b>Comprehensive physical assessment</b> <b>Documentation</b>	2	2
6	Expanded Patient assessment Differential diagnosis	<b>Comprehensive physical assessment</b> <b>Documentation</b>	2	2
7	Factors influencing CV disease and debilitating conditions		4	
8	Factors influencing CV disease and debilitating conditions Primary/secondary hypertension		4	
9	Respiratory disease/pathogenesis of obstructive pulmonary disease		4	
10	Bronchiectasis / Pneumonia Severe acute respiratory syndrome (SARS) / Bronchial asthma	<b>Spirometry testing</b>	3	1
11	Diabetes Mellitus & associated chronic complications		4	
12	Diabetes treatment and control Types of insulin/Lantus Oral meds		4	

MCA Name: Jackson County  
MCA Board Approval Date: September 22, 2015  
MDCH Approval Date:  
MCA Implementation Date: March 1, 2016

**Section 11-06**

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Class	Topic	Study-Exam-Lab Skills	Lecture	Lab
13	Diabetic wound care and ulcerations  Diabetic neuropathy – foot care Educating the patient	<b>Identify stages of decubitus ulcerations</b>  <b>Wound care techniques</b>		<b>4</b>
14	Urinary system and secondary complications Diabetic nephropathy Urinary tract infections (UTI)	<b>Urine dipstick testing</b>  <b>Lactate testing</b>	2	2
15	Chronic nervous system diseases & conditions – Alzheimer – dementia Memory testing Febrile seizures	<b>Memory testing</b>  <b>Home safety assessment &amp; Activities of daily living (ADL)</b>	2	2
16	Hospice and terminally ill patients Assessment and intervention Social worker intervention criteria	<b>Breathalyzer testing</b>	4	
17	Gastrointestinal disease and chronic debilitating conditions GERD/IBS, Hemorrhoids Antibiotic associated colitis Vomiting/diarrhea management		4	
18	Homebound patient with special needs; G-J Tubes, Foley Reinsertion Central /PICC lines/Implanted ports	<b>Foley catheter</b>  <b>G-J tube trainer</b>		<b>4</b>
19	Geriatric Care/Safety inspections Dental care – tooth pain Education for pts with A-fib / valvular disease	<b>Antibiotic, NSAID</b> <b>Benzocaine spray</b>	4	
20	Lab draws (Phlebotomy) on scene Strep screens Wound cultures Blood chemistry	<b>I-Stat Chem 7 &amp; 8 test</b> <b>Strep A test strips</b>		<b>2</b>
21	Immunizations schedule/education and administration of boosters	<b>Adult schedule</b>  <b>Td/Tdap, Influenza, Pneumonia</b> <b>Zoster, Hep A/B series</b>	4	

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Class	Topic	Study-Exam-Lab Skills	Lecture	Lab
22	Written Final exam Skills Review	<b>Foley Insertion</b> <b>Wound dressing</b> <b>Central venous Cath..dressing/flushing</b>	2	2
<b>General Medications commonly prescribed by physicians.</b>  CCP's should be <u>familiar</u> with: <ul style="list-style-type: none"> <li>• General class</li> <li>• Indication</li> <li>• Dosing</li> <li>• Side effects</li> <li>• Potentiation &amp; interaction</li> </ul>		Narcotics Non-Steroidal anti-inflammatories Antipsychotics Antidepressants Statins Anti-hypertensives ACE inhibitor Calcium channel blocker Diuretic Beta blockers GI therapy H2 blocker Proton pump inhibitor Oral diabetic medications Sulfonylureas Injected diabetic medications Asthma/COPD Short acting beta agonist Long acting beta agonist Inhaled steroid Inhaled anticholinergics Antibiotics Sleep aids Anticoagulants Erectile dysfunction medications Benzodiazepines Seizure medications Other		

- B. Clinical Experience
1. Emergency Department - 16 hrs adult and 16 hrs pediatric
  2. CCU/ICU - 16 hrs
  3. Hospice – 8 hrs
  4. Home/Wound care – 16 hrs
  5. Dialysis center – 4 hrs
  6. Nephrology care – 4 hrs
  7. Access center – 8 hrs
- C. Internship Rotations:
1. CP Unit – 24 hours