



Texas Rescue Med Program Manual

Comprehensive Student Guide, Policies, and Procedures

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1. Program Introduction

Texas Rescue Med provides Emergency Medical Responder (EMR), Emergency Medical Technician (EMT), and Advanced EMT (AEMT) education in accordance with the 2021 National EMS Education Standards and Texas Department of State Health Services requirements.

This program follows the 2021 National EMS Education Standards and associated Instructional Guidelines.

This manual outlines all rules, expectations, policies, and procedures required for successful participation in all programs.

All students are responsible for understanding and complying with this document.

Program Administration & Key Contacts

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2. Program Levels and Structure

2.1 Emergency Medical Responder (EMR)

The EMR program prepares individuals to provide immediate lifesaving care before the arrival of an ambulance or more highly trained personnel.

Key Competencies:

- Scene safety and assessment
- CPR and AED operations
- Basic airway management
- Bleeding control and shock management

Program Requirements:

- 60–80 instructional hours
- Skills competency evaluations
- Final written examination

2.2 Emergency Medical Technician (EMT)

The EMT program prepares students to provide basic emergency medical care and transportation.

Key Competencies:

- Patient assessment and documentation
- Airway and ventilation management
- Splinting, bandaging, and immobilization
- Oxygen administration

Program Requirements:

- Minimum 160 hours
- Skills labs and NREMT-aligned testing
- Minimum 10 patient contacts during clinicals

2.3 Advanced EMT (AEMT)

The AEMT program builds on EMT skills, adding limited advanced interventions and medication administration within the Texas scope of practice.

Key Competencies:

- IV therapy and fluid administration
- Advanced airway adjuncts (including intubation)
- Select medication administration
- Advanced patient assessments

Program Requirements:

- Minimum of 250 hours
- Didactic instruction, skills labs, and clinical/field rotations
- Successful completion of advanced skills competency evaluations

2.4 Minimum Attendance Standards

Students must attend at least 90% of all scheduled lectures and labs, and 100% of clinical and field requirements. Excessive absenteeism may result in dismissal from the program.

3. Admissions and Enrollment

3.1 General Requirements

All students must submit a complete enrollment application and required documentation by the assigned deadlines.

Admission is not guaranteed and may be limited by class size, instructor availability, or clinical placement capacity.

3.2 Level-Specific Requirements

EMR:

1. Must be 16 years of age prior to course completion (18 for certification)
2. High school diploma or GED recommended

EMT:

1. Must be 18 by course completion
2. High school diploma or GED required
3. Current CPR certification

AEMT:

1. Must be 18
2. Current EMT certification (Texas or NREMT)
3. Current CPR certification

3.3 Required Documentation

1. Government-issued photo ID
2. Immunization records
3. CPR certification
4. Background check and drug screen clearance prior to clinicals

Exceptions to this requirement can be made at the discretion of the Program Director or Course Coordinator

3.4 Immunizations and Health Requirements

Students must comply with immunization requirements for clinical placement. Failure to meet immunization requirements may prevent clinical participation and course completion.

3.5 Criminal Background Disclosure

Texas Rescue Med requires all students to undergo a criminal background check prior to participating in clinical or field rotations. Clinical partners may also require an additional background check or fingerprinting as part of their facility onboarding.

Admission into the program **does not guarantee** eligibility for Texas EMS certification or NREMT testing.

The Texas Department of State Health Services (DSHS) has sole authority to determine whether an individual is eligible for EMS certification based on criminal history.

DSHS may deny, suspend, or revoke EMS certification regardless of successful course completion if the applicant has a disqualifying criminal history or fails to meet state moral character standards.

Students are strongly encouraged to review the DSHS EMS criminal conviction guidelines before enrollment. Information is available at:
<https://www.dshs.texas.gov/emergency-medical-services-ems>

If a student is unable to attend clinicals or is denied certification due to a criminal history, Texas Rescue Med is not responsible for securing alternative clinical placement or for providing tuition refunds beyond the published refund policy.

4. Tuition, Fees, and Refund, and Collection/Appeals Policies

Tuition:

EMT - \$600 non-refundable deposit, then \$600 at the end of week 4 and \$600 at the end of week 8.

AEMT - \$1000 non-refundable deposit, then \$500 at the end of each month until the remainder of the tuition is paid.

Tuition must be paid in full before participation in skills labs or clinical externship components. Mandatory payments are required for each program.

Collection/Appeals:

If an account becomes past due, we will provide notices and offer reasonable repayment options. If payments are not made as scheduled, access to class materials may be limited

until payment is made. Students may appeal any charge within 15 days, and all appeals will be reviewed promptly and fairly. TRM's goal is to resolve the issues together with respect, clear communication, and flexibility.

Refund Schedule:

1. Within 3 business days of receipt of monies: Full refund, less any costs incurred by the school on behalf of the student.
2. Within 7 days of monies received: 75 percent refund, minus deposit
3. Within 14 days of monies received: 50 percent refund, minus deposit
4. After 14 days of monies received: No refund

5. Academic Requirements

All programs require a minimum passing average of 80 percent.

Written exams, quizzes, skills evaluations, and practical assessments must be completed as assigned.

NREMT exams are pass/fail and are scheduled by the student following course completion.

5.1 Remediation Policy (Cognitive, Psychomotor, and Affective)

Texas Rescue Med is committed to student success and utilizes a structured remediation process to correct deficiencies in knowledge, skills, or professional behavior. Remediation is designed to ensure students meet the required level of competency for progression and program completion.

A. Assignment of Remediation

Remediation may be assigned when a student:

- Scores below 80% on any major exam or cumulative module grade
- Fails a required psychomotor skill evaluation
- Receives an unsatisfactory rating in one or more affective domains
- Displays patterns of unsafe or inconsistent performance in lab, clinical, or field settings

The Program Director, Course Coordinator, or Lead Instructor may mandate remediation at their discretion when student performance reflects a risk to patient safety, team functioning, or program progression.

B. Cognitive Remediation

Students requiring cognitive remediation must:

1. Meet with the instructor or Program Director to review deficiencies

2. Complete assigned study materials, practice tests, or tutoring sessions
3. Complete a written reassessment

Maximum Attempts:

- Students may attempt remediation exams **twice**.
- Failure to achieve 80% on the second remediation attempt will result in dismissal from the program.

C. Psychomotor Remediation

Students who do not meet minimum psychomotor expectations must:

1. Review skill steps with an instructor
2. Practice under supervision until competent
3. Demonstrate successful performance during a formal re-evaluation

Maximum Attempts:

- Students may complete **up to three** skill remediation attempts per required skill.
- Failure to achieve competency after the third attempt constitutes failure of the course.

D. Affective Remediation

Students receiving an unsatisfactory affective evaluation must:

- Attend a meeting with the Program Director
- Sign a behavioral improvement plan
- Demonstrate correction of deficiencies by the next evaluation period

Failure to correct affective deficiencies or repeated violations may result in removal from clinical/field sites or dismissal from the program.

E. Documentation Requirements

All remediation activities will be documented in the student's file, including:

- Identified deficiencies
- Remediation plan
- Dates of remediation attempts
- Outcomes of reassessments
- Any disciplinary actions

Documentation is retained in accordance with program record retention policies.

F. Consequences of Failure to Remediate

Students who do not complete remediation within the assigned timeframe or who fail to meet competency requirements after the maximum number of attempts will be dismissed from the program and are not eligible for a course completion certificate.

5.2 Academic Integrity & Cheating Policy

Texas Rescue Med maintains a zero-tolerance policy for academic dishonesty. Integrity is a foundational expectation for all EMS professionals, and violations jeopardize patient safety, program credibility, and certification eligibility.

A. Definitions of Academic Dishonesty

Academic dishonesty includes, but is not limited to:

- Copying another student's work or exam answers
- Sharing test questions or exam content verbally, electronically, or on social media
- Using unauthorized materials during exams or skills testing
- Falsifying clinical or field documentation
- Signing or forging a preceptor's name
- Submitting skills, patient contacts, or hours that were not personally completed

B. Consequences

Depending on severity, academic dishonesty may result in:

- A failing grade on the assignment or exam
- Mandatory remediation
- Removal from clinical or field rotations
- Suspension or dismissal from the program
- Notification to Texas DSHS EMS Compliance for potential certification action

Academic dishonesty involving clinical records, patient contacts, PCRs, or competencies **will result in immediate dismissal.**

C. Reporting

Any instructor, preceptor, or student who identifies suspected academic dishonesty must report it directly to the Program Director. Investigations will be conducted promptly, and confidentiality will be maintained to the extent possible.

5.3 Student Record Retention Policy

Texas Rescue Med retains all student academic and clinical records in compliance with Texas Administrative Code §157.32.

A. Records Maintained

The following records are stored for a **minimum of five (5) years** from the student's course completion date or withdrawal date:

- Grades and exam results
- Skills checklists and psychomotor competency evaluations
- Clinical and field hours, patient contacts, and preceptor evaluations
- PCRs or documentation required during clinical/field rotations
- Affective evaluations and remediation documentation
- Course completion certificates
- Attendance data

B. Storage and Security

All student records are maintained in secure electronic or physical formats with controlled access by authorized staff only. FERPA and HIPAA protections apply to all student educational and clinical information.

C. Record Release

Student records will only be released:

- To the student (with identity verification)
- To Texas DSHS or NREMT for compliance or certification
- Pursuant to lawful subpoena or regulatory requirement
- With written consent from the student

D. Destruction of Records

After five years, records may be securely destroyed in accordance with institutional policy and applicable privacy standards.

5.4 Technical Requirements for Online and Hybrid Courses

Students enrolled in online or hybrid EMS programs at Texas Rescue Med must meet minimum technology requirements to ensure successful participation, ADA compliance, and reliable access to course materials. Students are responsible for ensuring that their devices and internet access remain functional throughout the course.

A. Minimum Device Specifications

Students must have reliable access to a desktop or laptop computer capable of running the Texas Rescue Med learning management system (LMS), participating in virtual classes, and accessing testing platforms. Minimum specifications include:

Operating System (minimum)

- Windows 10 or newer
- macOS 10.15 (Catalina) or newer

Processor

- Intel i3 / AMD Ryzen 3 or faster (i5 or better recommended)

Memory

- 8 GB RAM minimum (16 GB recommended)

Storage

- At least 10 GB of free space for course files and software updates

Required Features

- Functional webcam
- Microphone (built-in or external)
- Speakers or headphones
- Updated antivirus/anti-malware protection

Devices that are NOT acceptable as primary devices:

- Chromebooks (unless fully compatible with LMS modules)
- Tablets (iPads, Android tablets)
- Smartphones
These may be used for reading or communication, but not for online testing, assignments, or proctored activities.

B. Internet Connectivity Requirements

Students must maintain reliable internet access capable of supporting video streaming, live conferencing, and LMS activity.

Minimum Requirements:

- Download speed: **5 Mbps**

- Upload speed: **2 Mbps**

Recommended for best performance:

- Download: **25 Mbps or higher**
- Upload: **10 Mbps or higher**
- A wired (Ethernet) connection for online exams or proctored sessions

Students are responsible for securing alternative internet access if home service becomes unavailable.

C. Learning Management System (LMS) Participation Expectations

All students must:

- Log in to the LMS regularly enough to complete all required assignments
- Complete assigned readings, modules, videos, and quizzes by deadlines
- Access and respond to instructor announcements
- Upload assignments in the required format (PDF, DOCX, etc.)
- Participate in online discussion boards or weekly check-ins when assigned

Failure to meet LMS participation expectations may result in:

- Being marked absent
- Required remediation
- Removal from the program for non-participation

D. Attendance Tracking for Online/Hybrid Courses

Texas Rescue Med uses multiple indicators to track attendance and participation, including:

- LMS login frequency
- Module completion timestamps
- Submission of weekly assignments
- Participation in scheduled virtual class sessions
- Engagement with quizzes, exams, and discussion boards

Missed online activity counts as an absence under the program's attendance policy. Students must contact the instructor in advance if they expect to miss an online session or a deadline.

E. Student Responsibility for Technical Issues

Students are responsible for:

- Maintaining functioning hardware and internet
- Backing up course files regularly
- Monitoring LMS announcements and email communication
- Updating software, browsers, and plugins required for LMS operation

Technical difficulties **do not excuse missed deadlines**, except in rare documented cases approved by the Program Director.

Students experiencing technical problems should contact Texas Rescue Med technical support immediately.

F. Accessibility and ADA Considerations

Students needing accommodations under the Americans with Disabilities Act (ADA) must notify the Program Director **prior to beginning the course** or as soon as an accommodation need becomes known.

Texas Rescue Med will make reasonable accommodations in accordance with ADA guidelines, provided they do not compromise essential EMS program functions or patient safety standards.

6. Clinical and Field Education

6.1 EMR

Clinical experience is not required unless specified by the program or sponsoring agency.

6.2 EMT

Students must complete required clinical hours and obtain a minimum of 10 patient contacts documented and validated by a preceptor.

6.3 AEMT

Students must complete clinical and field rotations, including required ALS and BLS contacts and advanced skill competencies such as IV starts and medication administration.

6.4 Conduct and Professional Expectations

Students must follow all rules and expectations of clinical sites. Failure to do so may result in removal from the site and dismissal from the program.

6.5 EMT Clinical and Field Requirements (Program Policy)

EMT students are required to complete a minimum of 36 hours of field externship on an ambulance. All hours must be completed with an approved clinical affiliate or preceptor.

EMT students must obtain a minimum of 10 documented patient contacts. A patient contact is defined as direct interaction with a real patient, participation in assessment or care, and documentation signed by a preceptor.

All EMT externship requirements must be completed within the designated program timeline.

6.6 AEMT Clinical and Field Requirements (Texas Requirement and Program Policy)

AEMT students are required to complete a total of 96 externship hours, consisting of:

- 48 hours in a hospital clinical environment
- 48 hours on an ambulance in a field externship

AEMT students must obtain a minimum of 25 documented patient contacts, including BLS and ALS encounters, as available.

AEMT students in Texas are required to complete endotracheal (ET) intubation competency as part of program completion requirements. Successful intubations must be documented and verified by a qualified preceptor in an approved clinical setting.

6.7 Simulation Policy for Limited Clinical Access

In the event that clinical access is limited, approved high-fidelity simulation may substitute for a portion of clinical hours at the Program Director's discretion. Documentation of all simulation-based competencies is required.

6.8 Clinical and Field Makeup Policy

Clinical and field externships are required components of all EMS programs offered by Texas Rescue Med. Because clinical availability is limited and dependent on partner facilities, students must adhere to the clinical schedule assigned to them. Makeup hours are not guaranteed.

A. Eligibility for Makeup Hours

Makeup clinical or field hours **may be permitted** only under the following circumstances:

1. **Illness or injury** requiring the student to remain home
2. **Unexpected emergency** (car accident, family emergency, etc.)
3. **Approved absence** pre-authorized by the Program Director
4. **Facility cancellation** caused by the clinical site

Absences due to work schedule conflicts, transportation issues, or voluntary scheduling changes are **not eligible** for makeup hours.

B. Maximum Allowable Clinical Absences

- Students may miss **no more than 10%** of their assigned clinical or field hours.
- Missing more than 10% of scheduled hours **may result in dismissal from the program** if makeup opportunities are unavailable.
- Students must notify both the Program Director and the clinical site **at least 2 hours prior** to the scheduled shift start time for an absence to be considered excused.

Unreported (no-call/no-show) absences **are not eligible** for makeup and are grounds for disciplinary action.

C. Makeup Hour Scheduling

Makeup hours are scheduled at the discretion of Texas Rescue Med and are subject to:

- Clinical site availability
- Preceptor availability
- Program deadlines

Students may be reassigned to a different clinical site to complete required hours if needed.

Because of limited availability, **Texas Rescue Med does not guarantee that makeup hours can be scheduled** before course completion deadlines.

D. Fees for Makeup Assignments

Due to additional administrative coordination and clinical site restrictions, Texas Rescue Med reserves the right to charge a **clinical makeup fee** for any student-requested makeup hours, except in cases of facility cancellation.

- Standard makeup fee: **\$50 per missed clinical shift**
- Additional costs may apply for onboarding or rescheduling at certain partner facilities

Fees must be paid prior to scheduling makeup hours.

Facility-initiated cancellations do **not** incur fees.

E. Student Responsibilities

Students must:

- Communicate absences promptly
- Submit any required documentation (doctor's note, emergency verification, etc.)

- Be flexible with scheduling for makeup shifts
- Adhere to all deadlines established by the Program Director

Failure to complete makeup requirements within program timelines will result in ineligibility for a course completion certificate.

F. Limitations

Texas Rescue Med cannot guarantee makeup hours in the following circumstances:

- Excessive student absences
- Clinical site blackouts or seasonal limitations
- Situations where the student is not permitted to return due to conduct issues
- Deadlines approaching the end of the program

If makeup hours cannot be completed due to the above limitations, the student may be required to:

- Repeat the clinical portion of the course
- Re-enroll in a future class
- Be dismissed from the program

G. Statement of Responsibility

The student assumes full responsibility for completing all required clinical and field hours. Failure to attend scheduled shifts or to complete makeup assignments is not the responsibility of Texas Rescue Med or its clinical partners.

6.9 Student Scope of Practice in Clinical and Field Settings

To protect patient safety and comply with Texas DSHS regulations and clinical partner agreements, all Texas Rescue Med students must adhere strictly to the student scope of practice for their level of training.

A. Scope-of-Practice Limitations

Students may perform **only those skills** that:

1. Have been taught in the program,
2. Are approved for student practice by Texas Rescue Med, **and**
3. Are explicitly permitted by the **clinical or field site preceptor** during the shift.

Students are **not permitted** to perform any skill or procedure that exceeds the Texas Department of State Health Services (DSHS) scope of practice for the student's

certification level (EMR, EMT, or AEMT), regardless of preceptor request or encouragement.

B. Preceptor Oversight Requirement

All clinical and field skills must be performed:

- Under the **direct supervision** of the assigned preceptor
- With **explicit permission** given prior to performing the skill
- Within the operational policies of the hosting EMS agency or hospital

Students must immediately stop any skill or action if instructed to do so by a preceptor, clinical staff member, or Texas Rescue Med instructor.

C. Prohibited Activities

Students may not:

- Perform skills beyond their certification level
- Make independent medical decisions
- Administer medications not authorized for student practice
- Perform invasive procedures without preceptor supervision
- Document as the primary provider on any official patient care report
- Function as agency personnel or be counted toward staffing levels

Students also may not perform any procedure that is outside the clinical site's student policy, even if the program teaches the skill.

D. Accountability and Consequences

Violations of the student scope of practice may result in:

- Immediate removal from the clinical or field site
- Affective and academic disciplinary action
- Mandatory remediation
- Dismissal from the program
- Reporting to Texas DSHS EMS Compliance if patient safety is compromised

E. Clarification of Educational vs. Certification Scope

Students may practice certain skills in a lab setting (e.g., advanced airway simulations) as part of the instructional process.

However, this **does not authorize** performing these skills on live patients **unless**:

- The student is at the appropriate program level, **and**
- The skill is permitted under Texas DSHS scope of practice, **and**

- The clinical site specifically authorizes student performance of the skill.

Educational exposure does **not** expand the student's legal scope of practice.

F. Duty to Decline Unsafe or Unauthorized Procedures

Students must decline to perform any skill if:

- They have not been trained,
- They do not feel competent,
- The skill exceeds their certification level, or
- The preceptor request violates Texas Rescue Med policy.

Students must notify the Program Director immediately if they are pressured to perform unauthorized or unsafe procedures.

7. Professional Conduct

Professional behavior is mandatory. Harassment, discrimination, bullying, dishonesty, or unprofessional behavior may result in disciplinary action or dismissal.

7.1 Social Media & Professional Image Policy

Students must uphold professionalism on all social media platforms. Sharing patient information, posting photos in uniform at clinical or field sites, or any content that reflects negatively on Texas Rescue Med is prohibited. Violations may result in disciplinary action or dismissal.

7.2 Clinical Dress Code Policy

Students must adhere to the clinical dress code, which includes:

- Clean, professional uniform
- Closed-toe footwear
- Limited jewelry
- Hair secured
- Compliance with clinical site requirements

Failure to comply may result in removal from clinical rotations.

7.3 Transportation Requirement

Students are responsible for their own transportation to and from all Texas Rescue Med classes, clinical sites, and field externships. Lack of transportation does not exempt students from attendance requirements.

7.4 Emergency Vehicle Operation Prohibition

Students participating in clinical or field externship rotations are **not permitted to operate any emergency vehicle** at any time. This includes, but is not limited to:

- Ambulances
- Response units
- Fire apparatus
- Supervisory vehicles

The operation of an emergency vehicle requires specific licensure, agency credentialing, and authorization under Texas law. Students are present in the clinical setting **solely for educational purposes** and must not assume crew responsibilities that exceed their role.

Students may observe vehicle operations from the patient compartment or designated crew areas, but **may not drive, reposition, or otherwise move emergency vehicles under any circumstance**, including during non-emergency conditions such as:

- Station move-ups
- Refueling
- Vehicle checks
- Parking or repositioning at hospital bays

Violation of this policy may result in:

- Immediate removal from the clinical or field site
- Disciplinary action up to dismissal from the program
- Reporting to Texas DSHS EMS Compliance if patient safety is compromised

Texas DSHS requires this policy and applies universally across all clinical and field affiliates.

7.5 Termination, Dismissal, and Reinstatement Policy

Texas Rescue Med maintains high standards of conduct, professionalism, and academic integrity to protect patient safety, comply with Texas DSHS requirements, and ensure a productive learning environment. Students may be removed from clinical rotations or dismissed from the program for violations of policy, unsafe behavior, or failure to meet academic or professional expectations.

This section outlines the conditions for removal, dismissal, reinstatement eligibility, and refund status.

A. Grounds for Removal From Clinical or Field Rotations

Students may be immediately removed from a clinical or field site for any of the following:

1. **Unsafe patient care practices**
2. **Violation of HIPAA or exposure-reporting procedures**

3. **Unprofessional behavior**, including disrespectful conduct toward staff, patients, or preceptors
4. **Failure to follow instructions from preceptors or clinical site leadership**
5. **Arriving late, leaving early, or missing a clinical shift without proper notification**
6. **Being under the influence of alcohol, drugs, or impairing substances**
7. **Falsifying clinical documentation, patient contacts, or preceptor signatures**
8. **Not meeting minimum clinical competency standards**
9. **Repeated dress code violations or failure to bring required equipment**

Removal from a site may be **temporary or permanent**, depending on severity.

If a site bans a student from returning, Texas Rescue Med **cannot guarantee alternate placement**, and the student may be dismissed from the program.

B. Grounds for Program Dismissal

Students may be dismissed from the program for:

1. **Failure to meet academic requirements** (overall average below 80%, failed remediation)
2. **Failure of required skill evaluations** after remediation attempts
3. **Repeated or serious affective evaluation failures**
4. **Non-compliance with attendance or participation requirements**
5. **Violation of Academic Integrity Policies**, including cheating or falsifying records
6. **Behavior that endangers patient, student, or staff safety**
7. **Possession of weapons or illegal substances during any program activity**
8. **Harassment, discrimination, or conduct violating Title IX or anti-discrimination laws**
9. **Criminal activity occurring during enrollment**
10. **Failure to pay tuition or fees according to the established payment schedule**
11. **Inability to secure clinical placement due to student behavior, documentation issues, or facility restrictions**

Dismissals may occur **without prior warning** for serious offenses.

C. Conditions for Reinstatement

Reinstatement is **not guaranteed** and is granted solely at the discretion of the Program Director.

A student may be considered for reinstatement only when:

1. The reason for dismissal is **resolvable** (e.g., temporary medical issue, hardship documentation, corrected behavioral issue).

2. The student submits a **written request** for reinstatement within **30 days** of dismissal.
3. A corrective plan is established that may include:
 - Additional coursework
 - Affective remediation
 - Skills reevaluation
 - Professional behavior contract
 - Payment of outstanding balances
4. Clinical partners are willing to accept the student (if clinical access was involved).

Students dismissed for the following are **NOT eligible for reinstatement**:

- Cheating or falsification of records
- HIPAA violations involving patient data disclosure
- Drug or alcohol use during class or clinicals
- Violent or abusive conduct
- Dishonesty related to patient care

Reinstated students may be required to **repeat the entire course** at their own expense.

D. Refund Status After Dismissal

Students dismissed from the program are subject to the standard refund policy outlined in Section 4. Refunds will be issued based on the **date of dismissal**, not the last date of attendance.

The following are non-refundable under any circumstances:

- Deposits
- Fees paid to third parties (background checks, drug screens, NREMT fees, books, equipment, uniforms)
- Clinical makeup fees
- Completed instructional periods

Dismissal for misconduct, academic failure, or policy violation does **not** entitle a student to a refund beyond the published refund schedule.

E. Documentation of Dismissal

All dismissals will be:

- Documented in writing
- Added to the student's official record
- Communicated to the student via email and/or certified letter
- Reported to Texas DSHS EMS Compliance when required (e.g., safety, HIPAA, falsification)

8. Safety and Compliance

All students must comply with universal precautions, PPE requirements, HIPAA privacy standards, and reporting procedures for exposures or injuries.

Reasonable suspicion, drug or alcohol testing may be required.

8.1 Title IX & Anti-Discrimination Policy

Texas Rescue Med is committed to maintaining a safe, respectful, and inclusive educational environment.

Discrimination, harassment, sexual misconduct, or retaliation based on sex, gender, race, religion, national origin, disability, or any other protected class is strictly prohibited.

Reports or concerns must be directed to:

Title IX Coordinator:

Dan Kramer

dan@texasrescuemed.com

512-710-9132

404 S. CM Allen Parkway

San Marcos, TX 78666

Confidentiality will be maintained to the extent possible. Retaliation against any individual who makes a report or participates in an investigation is strictly prohibited.

8.2 Immunization Requirements for EMS Students

Texas Rescue Med follows Texas Administrative Code §97.64 regarding immunization requirements for students enrolled in health-related training programs. All EMR, EMT, and AEMT students participating in clinical or field assignments must comply with the following requirements before any direct patient contact.

8.2.1 Required Immunizations or Proof of Immunity

Hepatitis B

Students must complete a three-dose Hepatitis B vaccination series or an approved two-dose series (e.g., Heplisav-B), OR provide a positive Hepatitis B surface antibody titer prior to any clinical exposure involving blood or body fluids.

Measles (Rubeola)

Students born on or after January 1, 1957 must provide documentation of two doses of measles-containing vaccine or a positive measles titer.

Mumps

Students born on or after January 1, 1957 must provide documentation of two doses of mumps vaccine or a positive mumps titer.

Rubella

Students born on or after January 1, 1957 must provide documentation of one dose of rubella vaccine or a positive rubella titer.

Varicella (Chickenpox)

Students must provide documentation of two doses of varicella vaccine, a positive varicella titer, or a provider-validated history of the disease.

Tetanus-Diphtheria-Pertussis (Tdap)

Students must provide evidence of one Tdap vaccination and a tetanus-containing booster within the past 10 years. If the Tdap was administered within the past 10 years, it may satisfy both requirements.

8.2.2 Additional Clinical Site Requirements

Some clinical affiliates may require additional immunizations or screenings, including but not limited to:

1. Annual seasonal influenza vaccine
2. Tuberculosis screening through the TB skin test or the QuantiFERON blood test
3. COVID-19 vaccination or exemption documentation, depending on facility policy

If a clinical site requires immunizations that a student chooses not to receive, Texas Rescue Med is not obligated to secure an alternative clinical placement. Failure to meet site-specific requirements may prevent clinical participation and course completion.

8.2.3 Documentation Requirements

Accepted forms of documentation include official immunization records, state registry records, military records, laboratory titers, or provider-verified disease history (varicella only).

Students must submit all required immunization documentation before beginning any clinical or field assignment. Failure to do so may result in delayed participation or removal from the program.

8.2.4 Medical or Conscientious Exemptions

Medical exemptions require a signed statement from a licensed physician specifying the medical contraindication and duration of exemption. Conscientious or religious exemptions may be submitted as allowed by Texas law; however, clinical sites are not required to accept such exemptions.

If a student with an exemption is denied clinical placement, Texas Rescue Med is not responsible for securing an alternative placement, and the student may be unable to complete the required clinical components of the program.

8.2.5 Program Policy Statement

All required immunizations must be completed and documented prior to any patient contact. Failure to comply with immunization requirements may prevent clinical placement, continuation in the program, or completion of certification requirements. Texas Rescue Med reserves the right to enforce all immunization policies to ensure compliance with state regulations and clinical partner agreements.

8.3 Exposure Control & Reporting Procedure

Texas Rescue Med follows OSHA Bloodborne Pathogens standards, Texas DSHS reporting requirements, and all clinical partner policies regarding exposures to blood or other potentially infectious materials (OPIM). Prompt reporting is essential for student safety and regulatory compliance.

A. What Constitutes a Reportable Exposure

A reportable exposure includes, but is not limited to:

- Needle sticks or sharps injuries
- Contact of blood/OPIM with non-intact skin
- Mucous membrane exposures (eyes, nose, mouth)
- Significant respiratory exposure where applicable
- Any incident in which the student believes a potential exposure occurred

B. Who Students Must Report To

Students must **immediately** notify:

1. **The on-site clinical preceptor**
2. **The Program Director or Course Coordinator**
3. **The clinical site charge nurse or supervisor**, as required by facility policy

Timely reporting is mandatory. Delays in reporting may compromise medical evaluation and DSHS-required documentation.

C. Required Documentation

Students must complete the following forms after any exposure:

- **Texas Rescue Med Exposure Incident Report**
- **Clinical Site Exposure Form** (if required by the facility)

- **Sharps Injury Log Entry**, when applicable
- Any additional documentation required by DSHS or hospital occupational health departments

All exposure documents must be submitted to the Program Director within **24 hours**.

D. Student Responsibilities After an Exposure

Following an exposure, students must:

1. Seek immediate first aid (wash, flush, or irrigate the site as appropriate).
2. Report the incident immediately following the procedure above.
3. Comply with hospital/agency occupational health evaluation.
4. Participate in recommended laboratory testing or follow-up.
5. Provide necessary documentation to Texas Rescue Med.
6. Refrain from discussing patient identity or exposure details except with authorized personnel (HIPAA compliance).

Failure to follow exposure procedures may result in removal from clinical sites or program dismissal.

E. Texas DSHS Reporting Requirements

Texas Rescue Med is responsible for submitting exposure-related documentation to the **Texas Department of State Health Services (DSHS) EMS Compliance Section** when required by law or facility policy. This includes:

- Significant exposures involving bloodborne pathogens
- Safety-related incidents that affect student or patient welfare
- Any exposure requiring medical follow-up as determined by clinical staff

Students may be contacted by DSHS for additional information if an exposure investigation is initiated.

F. Confidentiality

Exposure records are maintained confidentially in accordance with OSHA, HIPAA, and Texas privacy laws. Only authorized individuals may access exposure documentation.

8.4 FERPA & HIPAA Privacy Policy

Texas Rescue Med complies with the Family Educational Rights and Privacy Act (FERPA) and the Health Insurance Portability and Accountability Act (HIPAA). Students are expected to protect both academic and patient information encountered throughout the program.

A. FERPA – Student Educational Privacy Rights

Under FERPA, students have the right to:

1. **Inspect and review** their educational records held by Texas Rescue Med.
2. **Request amendment** of inaccurate or misleading records.
3. **Provide written consent** before the program releases personally identifiable information (PII) from educational records, except where FERPA authorizes disclosure without consent.
4. **File a complaint** with the U.S. Department of Education regarding alleged FERPA violations.

FERPA allows disclosure of educational records without prior student consent only to authorized parties, such as:

- Texas DSHS EMS Certification staff
- NREMT personnel
- Accrediting or regulatory bodies
- Clinical and field training affiliates (only information necessary for onboarding and safety)
- Individuals with legitimate educational interest
- Law enforcement when legally required

Directory information (such as name, enrollment status, or program level) may be released unless the student submits a written request for nondisclosure.

B. Storage and Security of Student Records

Texas Rescue Med maintains all student records in secure physical and electronic formats with restricted access. Records include:

- Enrollment documents
- Academic grades and transcripts
- Skills competency evaluations
- Clinical/field documentation
- Affective and remediation evaluations

Electronic records are password protected, and physical records are stored in locked facilities accessible only to authorized staff. Records are retained for a minimum of **five (5) years**, in accordance with TAC §157.32.

C. HIPAA – Protection of Patient Information

HIPAA requires all EMS students to safeguard patient confidentiality during clinical and field experiences. Students may not disclose any patient information outside of the clinical or educational setting.

Prohibited actions include:

- Discussing patient details outside of protected educational discussion
- Posting any patient-related information or images on social media
- Removing or copying clinical documents containing patient identifiers
- Sharing PCRs, patient names, or medical information with unauthorized individuals

Violations of HIPAA may result in:

- Immediate removal from clinical sites
- Disciplinary action up to dismissal
- Reporting to Texas DSHS EMS Compliance
- Potential civil or criminal penalties

D. Student Responsibilities Under FERPA & HIPAA

Students must:

- Maintain confidentiality in all academic, clinical, and operational settings
- Complete required privacy and security training assigned by Texas Rescue Med or clinical affiliates
- Securely store any clinical paperwork until it is submitted
- Immediately report suspected privacy breaches to the Program Director

Failure to adhere to FERPA or HIPAA regulations may result in disciplinary action, up to and including dismissal from the program.

9. Program Completion and Certification

Students must meet all academic, skills, clinical, and financial obligations to receive a course completion certificate.

Only students who receive a course completion certificate are eligible for NREMT testing at their respective level.

9.1 Requirements for Issuance of a Course Completion Certificate

In accordance with Texas Administrative Code §157.32, Texas Rescue Med will issue a Course Completion Certificate only to students who have demonstrated full competency in all required academic, psychomotor, clinical, and professional domains. Completion of the course does not guarantee eligibility for certification unless all requirements listed below have been met.

To receive a Course Completion Certificate, students must:

1. Pass All Cognitive Evaluations

- Achieve a minimum overall course average of **80% or higher**
- Complete and pass all module exams, quizzes, assignments, and cumulative final exams
- Complete any assigned remediation and re-assessment requirements

2. Demonstrate Competency in All Psychomotor Skills

Students must successfully perform all psychomotor skills required at their respective level (EMR, EMT, or AEMT), as verified by:

- Skills checklists aligned with NREMT exam standards
- Instructor or preceptor sign-off
- Documentation of remediation if applicable

Failure to demonstrate required competency will result in ineligibility for course completion.

3. Complete All Required Clinical and Field Experiences

Students must complete **all required hours, patient contacts, and skill competencies** as outlined in the program guidelines. This includes:

- Required number of documented patient contacts
- Required clinical and field hours
- Verified preceptor evaluations
- Documentation submitted within program deadlines

Students who do not complete clinical/field requirements on time will not be issued a certificate.

4. Meet All Affective Evaluation Standards

Students must:

- Maintain satisfactory affective evaluations throughout the program
- Demonstrate professionalism, ethical conduct, communication skills, teamwork, and safety practices
- Successfully complete any affective remediation plans assigned

Unsatisfactory affective performance or unresolved remediation will result in non-completion.

5. Fulfill All Financial Obligations

All tuition, fees, and associated program costs must be paid in full prior to issuance of a course completion certificate.

Texas Rescue Med will not issue a certificate to any student with an unpaid balance.

6. Provide Proof of Identity and Required Documentation

Students must:

- Verify identity consistent with Texas DSHS and NREMT requirements
- Submit all required enrollment, medical, immunization, and clinical documentation
- Resolve any outstanding compliance items prior to course completion

Failure to provide required documentation will result in a delay or denial of the completion certificate.

7. Maintain Compliance with Program Policies

Students must follow all academic, behavioral, safety, and clinical policies throughout the program. Violations may lead to dismissal or withholding of a course completion certificate.

Statement of Limitation

Issuance of a Texas Rescue Med Course Completion Certificate **does not guarantee** state certification or NREMT eligibility. The Texas Department of State Health Services (DSHS) and the National Registry of EMTs retain sole authority to determine certification eligibility.

Appendix A

Level-Specific Skills Checklists

Emergency Medical Responder (EMR) Skills Checklist

The following skills represent the minimum competency expectations for EMR students. All skills must be demonstrated to a qualified instructor and documented prior to successful completion.

Core Competencies

- Scene Size-Up and Safety Assessment
- Standard Precautions and PPE
- Primary Assessment (Airway, Breathing, Circulation, Disability, Exposure)
- CPR and AED Operation
- Basic Airway Management (Head-Tilt/Chin-Lift, Jaw Thrust)
- Obstructed Airway Management (Adult/Child/Infant)
- Oxygen Administration via Non-Rebreather Mask or Nasal Cannula
- Bleeding Control (Direct Pressure, Tourniquet, Wound Packing)
- Shock Management
- Patient Positioning and Recovery Position
- Assistance with Emergency Childbirth (Supportive Care Only)
- Lifting and Moving Techniques (Blanket Drag, Two-Person Carry)
- Communication and Documentation Basics

Emergency Medical Technician (EMT) Skills Checklist

The following skills must be successfully demonstrated by EMT students to meet program completion requirements. Skills must be evaluated using NREMT-aligned skill sheets and documented by an instructor or preceptor.

Airway and Breathing

- Manual Airway Positioning
- OPA/NPA Insertion
- Suctioning (Rigid and Soft Catheter)
- BVM Ventilation
- Oxygen Administration and Delivery Devices
- CPAP Application (If within program scope)
- Airway Assessment and Monitoring

Cardiovascular and Circulatory

- Hemorrhage Control (Direct Pressure, Tourniquet, Hemostatic Agents)
- Shock Management and Positioning
- Automatic External Defibrillator Use
- Assist with Prescribed Medications (Epinephrine Auto-Injector, Inhaler, Nitroglycerin, Aspirin per protocol)

Trauma and Immobilization

- Long Bone Immobilization
- Joint Immobilization
- Spinal Motion Restriction (Manual and Device-Assisted)
- Traction Splinting (If applicable)
- Burn Management and Dressing

Medical and Operational Skills

- Patient Assessment: Medical and Trauma
- Vital Signs Acquisition
- Glucose Measurement
- Patient Packaging and Movement (Stair Chair, Stretcher Operations)
- Radio and Verbal Communication with EMS Systems
- PCR Documentation Basics

Advanced EMT (AEMT) Skills Checklist

AEMT students must demonstrate competency in all EMT skills, plus the advanced skills listed below. Skills must be completed under appropriate supervision and documented via advanced competency forms.

Advanced Airway and Ventilation

- Supraglottic Airway Device Insertion (If approved by Texas Scope of Practice)
- Advanced Airway Adjunct Assessment
- IV-Assisted Ventilation Support

Vascular Access and Fluid Management

- IV Catheter Insertion (Minimum number as designated by program policy)
- Saline Lock Placement
- IV Fluid Administration and Rate Adjustment
- Discontinuation of IV Lines

Medication Administration

- Medication Rights Verification and 6 Rs
- Administration Routes:
 1. Intravenous (IV)
 2. Intramuscular (IM)
 3. Subcutaneous (SQ)
 4. Intranasal (IN)
- Medication Preparation and Dose Calculation
- Program-Approved Medication List (e.g., Dextrose, Naloxone, Ondansetron, Normal Saline)

Advanced Patient Assessment

- Detailed Medical and Trauma Assessment
- ECG Monitoring (If included in program)
- ALS Communication and Transfer of Care

Clinical and Field Requirements

- Minimum ALS Patient Contacts (Per program policy)
- Minimum Successful IV Attempts
- Minimum Medication Administration
- Preceptor Evaluation and Sign-Off

EMT Clinical and Field Requirements (Program Policy)

EMT students are required to complete a minimum of 36 hours of field externship on an ambulance. All externship hours must be completed with an approved clinical affiliate or preceptor.

EMT students must obtain a minimum of 10 documented patient contacts. Each contact must include:

- Direct interaction with a live patient
- Participation in assessment and care
- Documentation verified by a preceptor's signature

All requirements must be completed within the designated program timeline.

Required Documentation

- Field hours log signed by preceptor
- Patient contact forms for each encounter
- Skills competency sign-off sheets
- Professional conduct evaluation

AEMT Clinical and Field Requirements (Texas Requirement and Program Policy)

AEMT students are required to complete a total of 96 externship hours, consisting of:

- 48 hours in a hospital clinical environment
- 48 hours on an ambulance in a field externship

AEMT students must obtain a minimum of 25 documented patient contacts. These may include both BLS and ALS patient encounters, depending on availability.

Endotracheal Intubation Requirement (Texas Requirement)

AEMT students in Texas are required to complete endotracheal (ET) intubation competency as part of program completion. The student must:

- Perform ET intubation attempts under qualified supervision
- Complete the minimum number of required intubations per program policy (recommended: 3–5 successful intubations)
- Demonstrate proper confirmation of placement using primary and secondary methods (e.g., chest rise, auscultation, capnography)
- Secure the ET tube and monitor placement

- Document each attempt and have it verified by a qualified preceptor

Required Documentation

- Hospital skills log with verified hours
- Field externship log with verified hours
- Patient contact forms totaling 25 encounters
- ET intubation skills documentation, including successes and attempts
- Preceptor evaluation and sign-off

Appendix B

Affective Evaluation Tools

Purpose of Affective Evaluation

Affective evaluation measures professional behavior, attitude, communication, teamwork, and ethical standards demonstrated throughout the EMR, EMT, and AEMT programs.

This component reflects industry expectations for EMS providers and is required for successful program completion.

Affective Domains Assessed

The following domains are assessed in all program levels:

- Professionalism
- Communication
- Teamwork and Collaboration
- Accountability and Responsibility
- Ethical and Legal Conduct
- Respect for Diversity and Patients
- Emotional Stability and Stress Management

Affective Evaluation Rubric (All Levels)

Students will be evaluated using the following 4-point scale:

4 - Exceeds Expectations: Consistently demonstrates behaviors at a professional EMS provider level.

3 - Meets Expectations: Demonstrates appropriate behavior for a student at this level.

2 - Needs Improvement: Behavior occasionally falls below expectations.

1 - Unsatisfactory: Behavior is unprofessional or unsafe.

Evaluation Criteria

- Arrives on time and prepared for class, labs, and clinicals.
- Demonstrates respect toward instructors, preceptors, patients, and peers.
- Accepts feedback professionally and applies corrective action.
- Maintains patient confidentiality and HIPAA standards.
- Uses appropriate language and communication.
- Shows initiative and engagement in learning activities.
- Adheres to safety protocols and PPE requirements.
- Demonstrates emotional control under stress or feedback.
- Follows instructions and established chain of command.
- Displays integrity and honesty in all documentation and interactions.

Level-Specific Expectations

EMR Expectations

- Demonstrates willingness to learn foundational skills.
- Follows direction closely and asks questions appropriately.
- Maintains scene awareness and personal safety.
- Shows respect in simulated and real-life interactions.

EMT Expectations

- Demonstrates growing independence in assessments and skills.
- Communicates clearly with team members and patients.
- Demonstrates responsibility for equipment and documentation.
- Maintains professional behavior during field experiences.

AEMT Expectations

- Demonstrates leadership and initiative in clinical settings.
- Maintains calm under pressure during advanced skills.
- Communicates effectively with ALS providers and hospital staff.
- Exhibits strong ethical judgment in higher-risk situations.

Failure and Remediation Policy

If a student receives an unsatisfactory rating (1) in any core domain:

- The incident will be documented.
- A meeting will be scheduled with the Program Director.
- A remediation plan will be developed, including corrective actions and a timeline.

Failure to improve or repeated violations may result in removal from clinical sites or dismissal from the program.

Grievance and Appeal Process

Students may submit a written appeal regarding an affective evaluation within 5 business days.

The Program Director will review appeals and may involve additional faculty input.

All decisions will be documented and communicated to the student in writing.

External Appeal Option

Texas Rescue Med strives to resolve all student concerns and grievances fairly and promptly through the internal grievance process. However, under Texas Administrative Code §157.32, students have the right to elevate unresolved complaints to the Texas Department of State Health Services (DSHS).

If a student believes that the program has not appropriately addressed a grievance related to program operations, instructional quality, discrimination, safety, or regulatory compliance, the student may file an external complaint directly with:

**Texas Department of State Health Services
EMS Compliance & Investigations**

Mail Code 1876

P.O. Box 149347

Austin, TX 78714-9347

Phone: **(512) 834-6700**

Website: <https://www.dshs.texas.gov/emergency-medical-services-ems>

Students should first exhaust the internal grievance procedure unless the complaint involves allegations of criminal activity, fraud, or situations where internal reporting may be unsafe or inappropriate.

Retaliation against any student who files a grievance—internally or externally—is strictly prohibited.

Appendix C

Functional Job Descriptions for EMS Provider Levels

Emergency Medical Responder (EMR) Functional Job Description

Summary

The Emergency Medical Responder (EMR) provides immediate lifesaving care to critical patients while awaiting additional EMS resources. The EMR supports higher-level providers and performs basic interventions focused on airway, breathing, circulation, and scene safety.

Essential Duties and Responsibilities

- Conducts scene size-up to identify safety hazards and determine resource needs.
- Uses standard precautions and appropriate personal protective equipment.
- Performs primary patient assessment and recognizes life threats.
- Provides CPR and operates an Automated External Defibrillator (AED).
- Manages airway positioning and basic airway maneuvers.
- Controls external bleeding and manages shock.
- Assists with emergency childbirth under indirect supervision.
- Provides basic patient comfort and emotional support.
- Communicates patient status to responding EMS units.
- Documents findings and interventions per organizational policy.

Physical Requirements

- Ability to lift and move up to 50 pounds independently.
- Ability to kneel, bend, reach, and perform physical tasks in various environments.
- Ability to work in stressful and physically demanding situations.

Cognitive and Behavioral Expectations

- Demonstrates sound judgment and situational awareness.
- Maintains professional communication and demeanor.
- Follows protocols and direction from EMS personnel.

Emergency Medical Technician (EMT) Functional Job Description

Summary

The Emergency Medical Technician (EMT) provides basic life support (BLS), patient assessment, and transportation for sick and injured individuals. EMTs function as frontline EMS personnel and operate ambulances under medical direction and agency protocols.

Essential Duties and Responsibilities

- Conducts scene size-up and ensures personal, patient, and bystander safety.
- Performs primary and secondary patient assessments.
- Manages airway using basic adjuncts, including OPA and NPA.
- Provides ventilation with a bag-valve-mask (BVM) device.
- Administers oxygen therapy and operates delivery devices.
- Controls hemorrhage and performs wound and burn care.
- Applies splints, bandages, and spinal motion restriction devices.
- Assists patients with prescribed medications such as epinephrine auto-injectors, inhalers, and nitroglycerin in accordance with protocol.
- Obtains vital signs and performs glucose monitoring.
- Operates ambulances and transports patients safely.
- Communicates effectively with dispatch, medical control, and receiving facilities.
- Completes patient care reports and documentation accurately.
- Maintains equipment, supplies, and vehicle readiness.

Physical Requirements

- Ability to lift and move up to 125 pounds with assistance and 50 pounds independently.
- Ability to carry equipment, move patients, and work in confined or hazardous environments.
- Ability to work extended shifts and respond to emergencies at any hour.

Cognitive and Behavioral Expectations

- Demonstrates critical thinking and rapid decision-making.
- Maintains composure under stress and emotional situations.
- Adheres to ethical standards, confidentiality laws, and chain of command.

Advanced Emergency Medical Technician (AEMT) Functional Job Description

Summary

The Advanced Emergency Medical Technician (AEMT) provides limited advanced life support (ALS) in addition to all EMT-level skills. AEMTs perform invasive procedures such as IV therapy, select medication administration, and advanced airway management, including endotracheal intubation in Texas.

Essential Duties and Responsibilities

- Performs advanced patient assessments and recognizes time-sensitive emergencies.
- Establishes intravenous access and administers IV fluids.
- Administers approved medications via IV, IM, SQ, IN, and other authorized routes.
- Performs endotracheal intubation and confirms placement using recognized methods.
- Inserts and manages supraglottic airway devices when indicated.
- Monitors patient response to interventions and adjusts treatments per protocol.
- Conducts ECG monitoring if within program scope or agency practice.
- Collaborates with EMTs and paramedics during patient care and transport.
- Communicates patient status and interventions clearly to receiving facilities.
- Documents advanced procedures thoroughly and obtains preceptor or supervisor verification.
- Ensures medical equipment and vehicles are restocked and operational.

Physical Requirements

- Ability to lift and move up to 125 pounds with assistance and 50 pounds independently.
- Ability to perform invasive and fine motor procedures under pressure.
- Ability to work in dynamic environments, including hospitals, ambulances, and emergency scenes.

Cognitive and Behavioral Expectations

- Demonstrates advanced clinical judgment and leadership during patient care.
- Maintains calm and professional behavior during high-acuity situations.
- Adheres to legal, ethical, and regulatory standards governing advanced practice.