Accelerated Veteran Pathways in Healthcare: A Toolkit for Colleges



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Overview of Today's Session

- Introductions
- METC Overview
- Guide Overview
- Implementation
- Question and Discussion



Medical Education & Training Campus



Mr. Barry S. Moore 4 May 2018

Overview

- METC Mission & Vision
- Campus Highlights
- Accreditation & Credentials
- Bridge Partnerships & Degree Pathways
- Access to Our Bridge Partners
- Bridge Landing Pages
- Questions

Mission Statement

Train the World's **Finest** Medics, Corpsmen, and Technicians"

Our graduates must be the:

- Finest purveyors of their technical craft (knowledge, skills, and attributes).
- Finest Service members; fit to operate and excel within their Service-specific culture.
- Finest as individuals who understand and can execute their roles in joint endeavors.

METC Vision

Train for the Mission and Educate for a Lifetime of Service.



METC Scope

- 49 programs of instruction (36 consolidated; 13 single service)
- Approximately 5,500 students daily and 16,500 annually
- Over 1200 staff/faculty members from all Services
- Largest producer of allied health professionals in America
- Largest educational consolidation in US military history



Campus Footprint



METC Campus - 1.1 Million square feet Everything "state of the art"

METC Institutional Credentials

- National Institutional Accreditation Council on Occupational Education (COE)
- Regional Institutional Affiliation Community College of the Air Force (CCAF)
- American Council on Education (ACE)
- Programmatic Accreditation
 - 15 Accredited
 - 3 Programmatically recognized
- Certification/Licensure Opportunities



Programmatic Accreditation

Program	External Agency
Cardiopulmonary Technician (USAF)	CoARC (Commission on Accreditation for Respiratory Care)
Cardiovascular Technician (USA)	CAAHEP (Commission on Accreditation of Allied Health Education Programs)
Cytotechnologist (USA)	CAAHEP (Commission on Accreditation of Allied Health Education Programs)
Dental Assistant (USAF)	CODA (Commission on Dental Accreditation)
Dental Basic Lab Tech (USAF, USN, USA)	CODA (Commission on Dental Accreditation)
Histotechnician (USAF, USN)	NAACLS (National Accrediting Agency for Clinical Laboratory Sciences)
Medical Laboratory Technician (USAF)	NAACLS (National Accrediting Agency for Clinical Laboratory Sciences)
Medical Laboratory Technician (USA, USN)	NAACLS (National Accrediting Agency for Clinical Laboratory Sciences)
Neurodiagnostic Technologist (USAF, USN)	CAAHEP (Commission on Accreditation of Allied Health Education Programs)
Occupational Therapy Assistant (USA, USN)	ACOTE (Accreditation Council for Occupational Therapy Education)
Ophthalmic Technician (USA,USAF)	ACOE CoA-OMP (Comm. on Accreditation of Ophthalmic Med. Programs); JCAHPO
Pharmacy Technician (USA, USAF, USN, USCG)	ASHP (American Society of Health Systems Pharmacists)
Radiologic Technician (USA, USAF, USN, USCG)	JRCERT (Joint Review Committee on Education Radiologic Technology)
Respiratory Therapy Technician (USA, USN)	CoARC (Commission on Accreditation for Respiratory Care)
Surgical Technician (USA, USAF, USN)	CAAHEP (Commission on Accreditation of Allied Health Education Programs)

For the Transitioning Service Member, It's All About Credentials

- In medicine, the credential determines whether you can work or not.
- Today, the link between degrees and the credential is much greater than the past or in other career fields.



Civilian vs. Military Requirements

- Sometimes there is no civilian equivalent credential for a military occupational specialty.
- Some career fields do not require credentials.
- Military mission requirements do not always require civilian certifications.

Where there is significant overlap between civilian and military requirements, credentialing is a desired end state for both the Services and educational partners.

Degree Partnerships

- METC offers pathways to degrees and credentials
- Bridge Pathways
 - Articulates *maximum credit in a career pathway* for Service members and Veterans, saving them time and money.
 - Degree bridging with over 60 schools and over 500 degree completion pathways
 - Ongoing collaborations with 40+ other educational and non-educational partners
- Affiliations
 - Community College of the Air Force (CCAF)
 - George Washington University
 - University of the Incarnate Word
- USU/CAHS Independent Branch Campus
- Ongoing Cooperation & Collaboration with Education Support Office







A University Bridge Page



Degree Partnerships

- 100,000 METC alumni and counting...
- Service members becoming Veterans in our communities
 - total nearly 50% after 4 years of service or less.
 - are highly qualified & experienced.
 - are largely unrecognized & underutilized.



In the End, It's all about the Service Member

Thanks for Supporting Those That Support Our Nation!



Questions?



What is Я Military Cross-Walk?

A PLA method that compares the learning outcomes of a militaryoffered course or training to the learning outcomes of a course or training at a college or university to determine whether there is sufficient overlap to award academic credit.



Guide overview



Linking Learning and Work | www.cael.org

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Guide Contents

- Factors to consider before developing a cross=walk program
 - Market demand assessment
 - Delivery
 - Business Model
- Designing a Program
 - Who needs to be at the table
 - Support services
 - Processes
 - 85/15



Guide Contents (cont.)

- Marketing
 - Branding
 - Marketing channels
 - Getting the word out



Implementation



Implementation Steps

- Defining the goals
- Identifying needed resources
- Forming the program team
- Planning the work & setting deadlines
- Implementing the plan
- Monitoring implementation
- Evaluating outcomes
- Anticipating the unexpected





Curriculum Design

- Ask METC for most recent Program of Instruction (POI) or Curriculum Plan (CP)
- Conduct side by side comparison of METC and your institution's curriculum (aka Crosswalk)
- Consider ACE recommendations as part of the assessment process
- Consider other institutions' crosswalks if appropriate and enough info is available (aka don't reinvent the wheel!)



To Gap or Not to Gap?

- Are sufficient METC learning outcomes aligned with your program's outcomes to save time and money?
- If there are gaps, can the program address them without adding so much time to the program that it becomes unmarketable?
- Depending on the gap, consider "boot camp" offerings, online training, etc.





Crosswalk Example



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School EMT Curriculum to 68W METC Curriculum

School EMT Curriculum

- A. List the pathophysiology, signs and symptoms, and management of the following medical or trauma conditions including:
 - Cardiac and respiratory arrest

68W METC Curriculum, pg 17

Lesson Title: Module 4 Medical Emergencies 2015 Action Initiate treatment for medical emergencies Text: Condition:

Given a patient with complaints of a medical nature in a pre-hospital setting.

Standard:

IAW Chapters 16-24 in the Emergency Care 13th edition

Remarks: Ch 16 covers basic pharmacology focusing on the authorized medications an EMT can administer, prescribed medications the EMT may assist the patient with, how medications work and protocols for medication administration. Ch 17 covers the causes of dyspnea, physical examination and emergency care of common respiratory emergencies. Ch 18 deals with the identification of the signs and symptoms of cardiac compromise, assisting chest pain patients with prescribed medications and defibrillation of patients in cardiac arrest using the Automatic External Defibrillator. Ch 19 provides an overview of diabetes, differentiation of hypoglycemia and hyperglycemia, the approach to managing these patients including the indications and contraindications of oral glucose. The causes, management and transport of patients with brain disorders, neurological emergencies and altered mental status are also addressed. Ch 20 includes the identification of the most common allergens, recognition and management of allergic reactions before progression into anaphylactic shock and assisting a patient in administering their prescribed epinephrine auto injector. Ch 21 discusses the identification of activated charcoal. Ch 22 addresses recognition and management of abdominal complaints and familiarization of common abdominal conditions. Ch 23 includes the recognition of behavioral emergency, techniques in managing the interaction with an aggressive patient, the importance of personal safety, techniques of restraint and medico-legal considerations. Ch 24 provides instruction on renal and hematologic emergencies. Coagulopathies, including sickle cell anemia and renal diseases including kidney stones, renal failure and patients with indwelling catheters are discussed.

This example highlights a national text used at METC for the 68W MOS training. Institutions can see if they are utilizing the same course materials which helps validate the military training.



Start with a side-

of corresponding

course learning

competencies in

outcomes and

both of the

healthcare

curriculums.

by-side comparison

Program of Instruction (POI)



Curriculum Plan (CP)

Medical Education and Training Campus (METC)										
Basic Medical Technician Corpsman Program										
Navy B-300-0010 Hospital Corpsman Basic (HM-0000) Air Force L8AQJ4N031 01AA Basic Medical Technician Corpsman Program (4N0X1)										
Curriculum Plan										
Topic Scale House										
WEIS.KAREN L.1151062110 UKINAL DOMINIA L.1151062110										
KAREN L. WEIS Col, USAF, NC, PhD, FAAN Dean, Academic Affairs Medical Education Training Campus Fort Sam Houston, Texas 78234										
Effective with Class Start Date: (N) 1 May 2013 (AF) 1 May 2013										

Narrative Examples:

Lesson Title: Module 4 Medical Emergencies 2015 Action Initiate treatment for medical emergencies

Text:

Condition:

Given a patient with complaints of a medical nature in a pre-hospital setting.

Standard:

IAW Chapters 16-24 in the Emergency Care 13th edition

Remarks: Ch 16 covers basic pharmacology focusing on the authorized medications an EMT can administer, prescribed medications the EMT may assist the patient with, how medications work and protocols for medication administration. Ch 17 covers the causes of dyspnea, physical examination and emergency care of common respiratory emergencies. Ch 18 deals with the identification of the signs and symptoms of cardiac compromise, assisting chest pain patients with prescribed medications and defibrillation of patients in cardiac arrest using the Automatic External Defibrillator. Ch 19 provides an overview of diabetes, differentiation of hypoglycemia and hyperglycemia, the approach to managing these patients including the indications and contraindications of oral glucose. The causes, management and transport of patients with brain disorders, neurological emergencies and altered mental status are also addressed. Ch 20 includes the identification of the most common allergens, recognition and management of allergic reactions before progression into anaphylactic shock and assisting a patient in administering their prescribed epinephrine auto injector. Ch 21 discusses the identification and management of abdominal complaints and familiarization of common abdominal conditions. Ch 23 includes the recognition of behavioral emergency, techniques in managing the interaction with an aggressive patient, the importance of personal safety, techniques of restraint and medico-legal considerations. Ch 24 provides instruction on renal and hematologic emergencies. Coagulopathies, including sickle cell anemia and renal diseases including kidney stones, renal failure and patients with indwelling catheters are discussed.

SURG 102 Surgical Supplies and Equipment

Course Description:

This course will provide an overview of surgical equipment and supplies to include minimally invasive surgery. The function, assembly, use, and care of equipment in the surgical environment will be addressed.



Breakdowns by Clinical Tasks:

	300-68W10	Phase: Unphased			
Management Cat	alth Care Specialist egory: Resident	Status: Commanda			
Quarter: 3	Fiscal Year: 2016	Version: 15.1	Errata Sheet:	No Data	
	Individual Tas	k Summary - Lesso	ns		
081-000-0038	Individual Tas	·	<u>ns</u> C168W273 / 1 ©	No	No

Equipment Lists:

NSN (LIN): 6515-01-498-1114 () Batteries, Alkaline, Size AAA, Model 0040-0136 Intravenous Infusion Pump									
Lesson / Version:	Step	Student Ratio	Student Qty	Instructor Qty	Support Qty	CRI	Max	OPTEMPO Miles	OPTEMPO Hours
081- C168W025 / 1 ©	TLO - Perform cardio	1:6	50	0	0	Yes	50	0.0	0.0
	Remarks: Must exchange battery once it no longer works, 6s. Will need to be replaced; due to life cycle of battery.								



Curriculum Course Objectives:

Course Objectives and Levels of Learning:

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Learning Objective #	Lesson Name Lesson Objective Level of Lear				ning
			Cognitive	Psycho -motor	Affective
Unit 1: Surgica	al Specialties				
1.1.1	Surgical Case Worksheet Overview	Reproduce surgical case worksheets on an assigned case.	C1		
1.2.1	General Surgery	Name anatomy, tools/instruments, simple facts and terms, and pathophysiology related to scrub/circulator duties during general surgery procedures.	C1		
1.3.1	Obstetrics / Gynecological (OB/GYN) Surgery	Name anatomy, tools/instruments, simple facts and terms, and pathophysiology to scrub/circulator duties during Obstetric and Gynecological surgical procedures.	C1		

Hours	Method of Instruction	Mode of Delivery
0.1	(LE) Lecture	Resident Instruction
7.0	(PE) Practical Exercise (Hands-On/Written)	Resident Instruction
0.8	(DSL) Discussion (Small or Large Group)	Resident Instruction
1.0	(TE) Test	Resident Instruction
0.1	(DSL) Discussion (Small or Large Group)	Resident Instruction
	0.1 7.0 0.8 1.0	0.1(LE) Lecture7.0(PE) Practical Exercise (Hands-On/Written)0.8(DSL) Discussion (Small or Large Group)1.0(TE) Test0.1(DSL) Discussion (Small

Total (50 min hr) 9.0



Curriculum timeframes and methods of instruction:

Program Length Consolidated Courses

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Course	Course Title	Did	Lab/ Prac	Clin	WTest	PTest/ PPC	Other	Req'd Act.	Total
BIOL 101	Anatomy and Physiology	60	.75	0	4	.25	0	0	65
SURG 101	Introduction to Surgical Technology	23	7.5	0	4	6.5	0	0	41
SURG 102	Surgical Supplies and Equipment	13	7.25	0	3	6.75	0	0	30
SURG 103	Non-sterile Duties of the Surgical Technologist	10	16.75	0	3	14.25	0	0	44
SURG 104	Sterile Duties of the Surgical Technologist	9	22.75	0	2	18.25	0	0	52
SURG 105	Low Fidelity Surgery Simulation	3	33	0	2	34	0	0	72
SURG 106	Surgical Service Specialties	33	1.75	0	4	1.25	0	0	40
Total		151	89.75	0	22	81.25	0	0	344

Method of Instruction:	Hours
(LE) Lecture	0.1
(DSL) Discussion (Small or Large Group)	0.9
(TE) Test	1.0
(PE) Practical Exercise (Hands-On/Written)	7.0
Total Hours (Admin & Academic, 50 min hr)	9.0



BASIC EMT 101:

Student Learning Outcomes:

- A. List the pathophysiology, signs and symptoms, and management of the following medical or trauma conditions including:
 - 1. Cardiac and respiratory arrest
 - 2. Metabolic, anaphylactic, septic, hypovolemic, hemorrhagic, respiratory, cardiogenic, neurogenic, and psychogenic shock conditions.



Course Number: 300-68W10

Phase: Unphased

Course Title: Health Care Specialist

Management Category: Resident

Quarter: 3 Fiscal Year: 2016

Status: Commandant ApprovedVersion: 15.1Errata Sheet: No Data

68W METC Curriculum Page 19

Remarks: Module 5 covers the most common areas that can be injured during a traumatic event. Ch.25 provides an overview of the signs, symptoms and common causes of hypoperfusion, the progression of compensated and decompensated shock, cardiovascular and non-cardiovascular shock and prevention of shock. This chapter also comprises the identification of hemorrhage and impending shock, hypovolemic shock management, and methods used to control hemorrhage with direct pressure and tourniquets. Ch.26 teaches how to manage various soft tissue injuries. These injuries may range from minor scrapes and bruises to life-threatening injuries. Impalements, amputations and burns are also covered, including identification and management. Ch.27 provides physiology of chest injuries such as pneumothorax, hemothorax and tension pneumothorax including signs, symptoms and emergency management. Additionally, this lesson addresses identification, evaluation and management of blunt and penetrating trauma to the abdominal region and the genitourinary system. Ch.28 is designed to teach the 68W the signs, symptoms and treatment procedures for musculoskeletal injuries. Mechanism of injury, assessment of musculoskeletal injuries, assessing neurological function, and emergency care for extremity injuries are discussed. Ch.29 enables the 68W to treat injuries to the head, neck, and or spine. Identification of immobilization devices, treatment of injuries to the head, neck and spine are taught. Students will immobilize the spine of a sitting and lying patient using short and long backboards. Ch.30 concerns casualties with multisystem trauma and how to balance the critical trauma patient's need for prompt transport against the time needed to treat injuries at the scene. Various trauma score methods and their calculations are presented. Chapter 31 concludes module 5 with a variety of environmental emergencies, to include heat and cold injuries; snake, spider and insect bites, and water-related emergencies. Instructors are responsible to ensure all aspects of training; cognitive, affective and psychomotor objectives provided throughout the lesson are taught and reinforced during practical exercises. Patient contacts must be conducted, at a minimum, on human patient simulators. These patient contacts are a requirement for eligible trainees to obtain EMT certification from the National Registry of EMTs.

Security Clearance: Unclassified

Lesson Title: Control Bleeding 2015

Action Control bleeding

Text:

Condition:

Given a casualty with severe bleeding in a combat environment.

Standard:

Without compromising safety and casualty care standards

Remarks: This lesson reviews the structure and function of the circulatory system, the identification of hemorrhage, various conditions that will contribute to bleeding complications, and the various methods to control hemorrhage. The signs and symptoms unique to each phase of hypovolemic (hemorrhagic) shock and the appropriate field management are addressed. 68W students will learn the difference between compressible and non compressible injuries and how to manage them. 68W students are instructed on how to use emergency trauma bandages, hemostatic agents, the principles of wound packing, and the use of tourniquets to control bleeding.

Lesson Id/Version	Learning Object Id	Hours	Method of Instruction	Mode of Delivery
081-C168W257 / 1 ©	Introduction	0.1	(LE) Lecture	Resident Instruction
	TLO - ELO A - LSA 1	1.0	(PE) Practical Exercise (Hands-On/Written)	Resident Instruction
	TLO - ELO A - LSA 2	1.0	(PE) Practical Exercise (Hands-On/Written)	Resident Instruction
	TLO - ELO A - LSA 3	1.8	(PE) Practical Exercise (Hands-On/Written)	Resident Instruction
	Summary	0.1	(LE) Lecture	Resident Instruction

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Security Clearance: Unclassified

Lesson Title: Shock 2015

Action Initiate treatment for shock

Text:

Condition:

Given a casualty exhibiting signs and symptoms of shock

Standard:

Without compromising casualty care

Remarks: This lesson covers the different types of shock (hypo perfusion, anaphylactic, septic, neurogenic, and cardiogenic), their causes and specific effects the Combat Medic may encounter. An overview of the physiology of shock, classifications of shock, assessment of the casualty demonstrating the signs and symptoms, the components and uses for colloid and crystalloid solutions, and the specific management for each type of shock. This lesson culminates in a practical exercise where the student must demonstrate competency in the management of these casualties. Practical exercises for insertion of the IV/IO fluids are completed in a 1:1 student to instructor ratio. Human casualty simulation is utilized for the shock management and IV/IO fluid resuscitation practical exercises to enrich the quality of learning and to provide realism.



68W METC Curriculum Page 39

School Surgical Tech Curriculum to Army 68D and Navy HM-8483 METC Curriculum

One METC course may not meet all of the school's learning outcomes.

School Surgical Tech Curriculum

- 1. Discuss the anatomy of the vascular, thoracic, ophthalmic and integumentary systems.
- 2. Describe surgical procedures for peripheral x vascular surgery.
- 3. Describe surgical procedures for cardiothoracic ***** surgery.
- 4. Describe surgical procedures for plastic and reconstructive surgeries.
- 5. Describe surgical procedures for ophthalmic surgery.
- 6. Discuss pediatric surgery and procedures for congenital abnormalities.
- 7. Discuss priorities in emergency procedures for trauma surgery.
- 8. Identify surgical instrumentation needed for the related surgeries.
- 9. Discuss the pathology related to the appropriately learned surgical procedures.
- 10. Understand complications involved with peripheral vascular, cardiothoracic, ophthalmic, and plastic and reconstructive surgeries.
- 11. Discuss basic procedures for robotic surgery.

Linking Learn

68D and Navy HM-8483 METC Curriculum, pg 26-27

SURG 106 Surgical Specialties

This course provides an overview and reference of procedures encountered in various surgical specialties such as general surgery, OB/GYN, orthopedic, plastic and reconstructive etc. and the related requirements which the student will encounter in a clinical setting. Prerequisites: Completion of SURG 103 and SURG 104.

	Course Obje	ectives and Level	is of Learning:	1.4.1	Orthopedic	Name anatomy,
2	Learning Objective #	Lesson Name	Lesson Objective		Surgery	tools/instruments, simple facts and terms, and pathophysiology to scrub/circulator duties during Orthopedic surgical procedures.
	Unit 1: Surgica		-	1.4.2	Orthopedic	Assist with the application of
	1.1.1	Surgical Case Worksheet Overview	Reproduce surgical case worksheets on an assigned case.		Surgery	orthopedic surgical equipment and supplies.
	1.2.1	General Surg eny	Name anatomy, tools/instruments, simple facts and terms, and pathophysiology related to scrub/circulator duties during general surgery procedures.	1.5.1.	Genitourinary (GU) Surgery	Name anatomy, tools/instruments, simple facts and terms, and pathophysiology to scrub/circulator duties during genitourinary surgical procedures.
	1.3.1	Obstetrics / Gynecological (OB/GYN)	Name anatomy, tools/instruments, simple facts and terms, and pathophysiology to scrub/circulator duties during Obstetric and Gynecological	1.6.1	Plastic and Reconstructive Surgery	Name anatomy, tools/instruments, simple facts and terms, and pathophysiology to scrub/circulator duties during plastic surgical procedures.
	1111	Trauma &	surgical procedures. Name anotomy,	1.7.1	Cardiothoracic and Peripheral	Name anatomy, tools/instruments, simple facts
		Emergency Surgery	tools/instruments, simple facts and terms, and pathophysislogy to scrub/circulator duties during trauma and emergency surgical procedures.		Vascular Surgery	and terms, and pathophysiology to scrub/circulator duties during cardiac, thoracic, peripheral, and vascular surgical procedures.
	1.12.1	Neurosurgery	Name anatomy, tools/instruments, simple facts and terms, and pathophysiology to scrub/circulator duties during neuro-surgical procedures.	1.8.1	Ophthalmic (Eye) Surgery	Name anatomy, tools/instruments, simple facts and terms, and pathophysiology to scrub/circulator duties during Ophthalmic (Eye) surgical procedures.
	1.13.1	Pediatric Surgery	Name anatomy, tools/instruments, simple facts and terms, and pathophysiology to scrub/circulator duties during pediatric procedures.	1.9.1	Otorhinolaryngo logic (Ear, Nose and Throat) Surgery	Name anatomy, tools/instruments, simple facts and terms, and pathophysiology to scrub/circulator duties during Otorhinolaryngologic / Ear,
ning and Wor	1.14.1	Clinical Training and Employment Skills and Opportunities	Determine the requirements, standards, practices, and opportunities for a successful career in the various roles of a surgical technologist in the clinical setting.	1.10.1	Oral and Maxillofacial (OM) Surgery	Nose and Throat (ENT) surgical procedures. Name anatomy, tools/instruments, simple facts and terms, and pathophysiology to scrub/circulator duties during Oral and Maxillofacial (OM)

School Surgical Tech Curriculum to Army 68D and Navy HM-8483 METC Curriculum (continued) School Surgical Tech Curriculum

- 1. Discuss the anatomy of the vascular, thoracic, ophthalmic and integumentary systems.
- Describe surgical procedures for peripheral vascular surgery.
- 3. Describe surgical procedures for cardiothoracic surgery.
- 4. Describe surgical procedures for plastic and reconstructive surgeries.
- 5. Describe surgical procedures for ophthalmic surgery.
- 6. Discuss pediatric surgery and procedures for congenital abnormalities.
- 7. Discuss priorities in emergency procedures for trauma surgery.
- 8. Identify surgical instrumentation needed for the related surgeries.
- 9. Discuss the pathology related to the appropriately learned surgical procedures.
- 10. Understand complications involved with peripheral vascular, cardiothoracic, ophthalmic, and plastic and reconstructive surgeries.
- 11. Discuss basic procedures for robotic surgerv.



68D and Navy HM-8483 METC Curriculum, pg 14-15 and 18-19

Anatomy and Physiology **BIOL 101**

This course provides in-depth instruction into. Introduction to Anatomy and Physiology as well as Pharmacology and Anesthesia. Lessons are comprised of lecture and practical laboratory time using models and virtual computer programs. This includes identification of structures, interrelationships of systems, and cellular / organism physiology. The instructional design for this course is Group Lock Step.

Prerequisite(s): Completion of METC in Processing and METC Administrative Requirements.

Unit 1: Introduction to Anatomy and Physiology

ord roots, and Unit 2:	Unit 2: Surgical Pharmacology and Anesthesia					
and anatomy	Body Systems & Physiology	Define the human body systems structures and functions as well as Surgical Pharmacology and Anesthesia facts.				
r, how cells and nd basic	Surgical Pharmacology	Employ the principles and steps of procedure for working with pharmacological agents in a surgical setting.				
on, and wound 2.2.2	Surgical Pharmacology	Demonstrate safe and proper handling of medications and solutions onto the sterile field.				
	Surgical Anesthesia	Identify basic facts and terms				
, and Throat		associated with assisting anesthetic delivery and management of patient complications.				
a a a a a a a a a a a a a a a a a a a	medical terms / and anatomy o include2.1.1and Physiology gy, how cells and and basic rgical incisions, tion, and wound2.2.12.2.2	medical terms y and anatomy b include2.1.1Body Systems & Physiologyand Physiology gy, how cells and and basic rgical incisions, tion, and wound2.2.1Surgical Pharmacology2.2.2Surgical Pharmacologyn body systems' inctions. and specification e, and Throat2.3.1Surgical Anesthesia				

SURG 102 Surgical Supplies and Equipment

Course Description:

This course will provide an overview of surgical equipment and supplies to include minimally invasive surgery. The function, assembly, use, and care of equipment in the surgical environment will be addressed.

	2.2.1	Robotics, Laser	Outline the principles of robotics		10
Linking Learning and Wo		Safety and	/ laser safety measures.	Experiential Learning	40
		Applications		_	

Three MFTC courses meet 8 out of the 11 learning objectives listed in the school's curriculum. A school would need to determine what they will do if the METC curriculum does not perfectly match their learning objectives.

Measuring Success



Start the Way You Want to Finish

- Identify institutional and program goals
- Develop plan from admissions to beyond graduation
- Metrics should include:
 - Student performance
 - Student satisfaction
 - Retention
 - Completion
 - Post-graduation employment
 - Others?



Discussion and Questions





Thank You

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