



**STEEL CENTER**  
FOR CAREER AND TECHNICAL EDUCATION

# SYLLABUS

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## **Health Assistant: 51.0899**

Mrs. Kastronis • 2024 – 2025

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**Website:** [www.steelcentertech.com](http://www.steelcentertech.com)

**Programs – Health: Mrs. Kastronis class page**

- **Program description:** The Health/Medical Assisting program provides the student with basic anatomy and physiology, knowledge of the body systems and related diseases, introduction to health professions, introduction to medical terminology, basic Health Care Provider skills, and emergency care including BLS CPR certification. In addition, upon completion of the program eligible students will taking the Patient Care Technician Certification exam.
- **Instructional goals:**
  1. The students will develop a passion for the health professions and identify their desired career pathway.
  2. The students will attain knowledge and skills conducive to success in their continued education as well as on assessments, including the NOCTI and the Patient Care Technician examination.
  3. The teacher will guide students as a facilitator of learning, helping them realize their fullest potential.
- **Primary resources:**

**Textbook:** Simmers, L. (2022). DHO Health Science- **Supplied by the school**

**Uniform:** White or Navy Blue Medical Scrubs, White or Black supportive shoes, watch with a second hand, and a Long sleeve white Lab Coat- **purchased by the student**

- **Statement of assessment and evaluation protocols:**

Weekly test or quizzes, other assessments can include research projects, homework, and presentations. The following grading scale will be used on all tests and quizzes as well as all homework assignments, presentations and projects.

<b>Grading Scale</b>	
<b>90-100</b>	<b>=A</b>
<b>80-89</b>	<b>= B</b>
<b>70-79</b>	<b>= C</b>
<b>60-69</b>	<b>= D</b>
<b>&lt; 60</b>	<b>= E/F</b>

**Late Penalty:** 10% of total grade will be deducted for each school day assignment or project is late.

**Academic Integrity:** I value academic integrity very highly and do not permit any forms of dishonesty or deception that unfairly, improperly or illegally enhance a grade on an individual assignment or a course grade. Any breach of academic integrity will result in a “zero”.

- **Schedule of major assignments:**

The following should serve as a guide of the school year’s activities, this is subject to change:

**First 9 weeks Classroom Topics:**

- Safety/Student handbook- all student
- Professionalism- all students
- Legal and Ethical Issues- 1<sup>st</sup> year students
- Communication- 1<sup>st</sup> year
- Infection Control – 1<sup>st</sup> year
- Cardiovascular System- 1<sup>st</sup> year
- Body planes and cavities- 2<sup>nd</sup> and 3<sup>rd</sup> year
- Death and dying- 2<sup>nd</sup> and 3<sup>rd</sup> year
- Urinary system- 2<sup>nd</sup> and 3<sup>rd</sup> year
- Research Project with oral presentation- all

**First 9 weeks Lab Topics:**

- Handwashing and Gloves- 1<sup>st</sup> year
- Common Procedures/Privacy- 1<sup>st</sup> year
- Bed making/soiled linens – 1<sup>st</sup> year
- Temperature- 1<sup>st</sup> year
- Pulse – 1<sup>st</sup> year
- PPE- 2<sup>nd</sup> and 3<sup>rd</sup>
- Blood pressure- 2<sup>nd</sup> & 3<sup>rd</sup>
- Height and weight – 2<sup>nd</sup>
- Post mortem care- 2<sup>nd</sup>
- Specimens- 2<sup>nd</sup>
- Catheter care- 3<sup>rd</sup>
- Dermal puncture- 3<sup>rd</sup>
- ROM exercises-3<sup>rd</sup>

## **Second 9 weeks Classroom**

### **Topics:**

Medical terms- all student  
Muscular system- all students  
Skeletal system- all students  
Nutrition – 1st  
Nervous System- 2<sup>nd</sup>  
Human Growth and development-2nd  
Reproductive system- 2<sup>nd</sup> & 3<sup>rd</sup>  
Patient position and transfers- 2<sup>nd</sup> and 3<sup>rd</sup>  
Immune system- 2<sup>nd</sup> and 3<sup>rd</sup>  
Research project with oral presentation- all

## **Second 9 weeks Lab Topics:**

Respiration – 1<sup>st</sup> year  
Blood Pressure- 1<sup>st</sup> year  
Height & Weight- 1<sup>st</sup> year  
Dangling and gait belt- 1<sup>st</sup> year  
Pain/Comfort Measures- 1<sup>st</sup> year  
I&O/Meal percent consumption/feeding- 1<sup>st</sup> year  
Wound care- 2<sup>nd</sup> and 3<sup>rd</sup> year  
Hoyer lift and patient transfers- 2<sup>nd</sup> and 3<sup>rd</sup>  
Walker, crutches and cane use – 2<sup>nd</sup> and 3<sup>rd</sup>  
Oxygen use/pulse oximeter, incentive spirometer- 2<sup>nd</sup> and 3<sup>rd</sup>  
Patient care technician skills- seniors

## **Third 9 weeks Classroom Topics:**

Digestive System- 1<sup>st</sup>  
Respiratory System- 1  
Endocrine system- 2<sup>nd</sup> and 3<sup>rd</sup> year  
Lymphatic system – 2<sup>nd</sup> and 3<sup>rd</sup> year  
Immune system- 2<sup>nd</sup> and 3<sup>rd</sup> year  
Patient care technician modules- seniors

## **Third 9 weeks Lab Topics:**

Bathing, Peri-care, personal grooming dressing and undressing- 1<sup>st</sup> year  
Hand and foot care- 1<sup>st</sup> year  
Oral and Denture Care- 2<sup>nd</sup> year  
Therapeutic compression devices – 2<sup>nd</sup> year  
Visual acuity testing- 2<sup>nd</sup> year  
DRG and medical coding- 3<sup>rd</sup> year  
Insurance and EMR- 3<sup>rd</sup>

**Fourth 9 weeks Classroom Topics:**

Integumentary system- 1<sup>st</sup> year  
Emergency Care and Disaster Preparedness- all students  
CPR and First Aid Certification- all students  
Patient Care Technician Responsibilities – seniors  
Patient Care Technician Modules- seniors  
Research Project with oral presentation- all students

**Fourth 9 weeks Lab Topics:**

BLS CPR/AED training- All students  
Medical Emergencies: 1<sup>st</sup> and 2<sup>nd</sup> year  
Patient care technician skills- seniors

**STEEL CENTER for CTE HEALTH ASSISTANTS**

**MRS. KASTRONIS SYLLABUS AND PROGRAM RULES**



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**ACKNOWLEDGEMENT SHEET**

FOR STUDENT:

With my signature, I acknowledge that I am fully aware of the rules, procedures, and expectations for my CTE program of study. I understand that my signature indicates awareness and not necessarily approval.

Student name: \_\_\_\_\_

Student signature: \_\_\_\_\_

Date: \_\_\_\_\_

FOR PARENT/GUARDIAN:

With my signature, I acknowledge that I am fully aware of the rules, procedures, and expectations for my son's or daughter's CTE program of study. I understand that my signature indicates awareness and not necessarily approval.

Parent/Guardian signature: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

Date: \_\_\_\_\_

Note: This document shall be filed and maintained by program instructors. Unsigned or unreturned signature sheets are