Paramedic Program Clinical Policies & Procedures

Clinical Experience

Students will be required to complete clinical rotations in various settings with their progress being gauged by a combination of hours completed and proficiency of skills. All clinical rotations must be completed for the student to be eligible for certification. Clinical course syllabi will be distributed separately that clearly outlines all policies and procedures pertaining to clinical time. Falsification of any clinical experience will make the student subject to expulsion from the program.

Field Internship

Students will be required to complete a Field Internship to ensure competency as an entry level Paramedic. The Field Internship is designed to provide the student with a progression of increased patient care responsibilities. The Field Internship must be completed for the student to be eligible for certification. The Field Internship course syllabi will be distributed separately that clearly outlines all policies and procedures pertaining to the Field Internship.

Clinical Objectives

The paramedic student will rotate through several clinical areas at different clinical affiliates during the program.
The purposes of these rotations are:
1. To provide exposure to the types of injuries and diseases commonly encountered by the paramedic, i.e., cardiovascular disease and trauma, as well as those less commonly encountered situations such as critical pediatrics.
2. To provide clinical practice of specific psychomotor skills utilized by the paramedic, i.e., IV access, endotracheal intubation, EKG interpretation, medication administration, splinting, and bandaging, etc.
3. To provide a controlled environment through which the students will be able to access, and when appropriate, assist in the treatment of patients under the direct supervision of physicians, nurses, technical staff, and paramedic preceptors.
4. To provide clinical experience in the pre-hospital phase of care under the direction of paramedic preceptors.
5. To provide educational activities that will clarify emergency medical concepts pertaining to assessment and treatment.
6. To foster appreciation of the contribution that pre-hospital interventions can have on the subsequent care and treatment of patients.

Clinical Rules and Regulations

All students are responsible for demonstrating a professional attitude towards the clinical facility, its personnel, its patients, and their families. This includes being enthusiastic, mature, motivated to learn, and acceptance of responsibility.

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Though students are not employees of the clinical site, nevertheless, they are subject to all rules and regulations of the clinical facility. The clinical facility rules and regulations will be specified by the clinical faculty; the student is required to become familiar with them and strictly abide by them.

Unexcused tardiness or absence, unavailability, inappropriate behavior, improper conduct, or any failure to comply with the clinical facility rules and regulations may result in immediate disciplinary action by the clinical faculty, Lead Instructor, Clinical Coordinator, or the Paramedic Program Director.

All students are expected to be responsive and enthusiastic in their performance. They are to follow directions, be attentive to patients, ask questions, and participate actively in all learning experiences.

All students are expected to seek out independent learning experiences, as well as those assigned. Students are expected to utilize all clinical time effectively and should be familiar with all objectives prior to the start of each clinical day.

Students are required to schedule clinical/field rotations in advance utilizing the Program's clinical management system application. Students are not permitted to work while they are on clinical/field rotations, nor can they count work hours towards required clinical/field hours at any phase of the rotations.

Students will be required to have a completed Evaluation Form for each rotation completed using the clinical management system application. All information must be completed in order to count towards the required clinical competencies (i.e., Call ID, Medical Record Number, etc.). Patient names are not to be used.

All documentation from clinical must be completed within 48 hours of the shift being completed. Failure to do so will result in a grade reduction and/or the shift will not be counted towards clinical objectives. Patterns of late and/or incomplete data entry will not be tolerated.

Failure to complete all clinical and field internship assignments by the Final Summative Evaluation date may lead to the student's failure of the program or delay in their graduation date.

While there may be many ways to perform a procedure and perform it correctly, only those variants sanctioned by the Program Medical Director, Paramedic Program Director and/or the Lead Instructor will be acceptable.

Attendance at all clinical and field internship assignments must be met.

No student is to complete more than 18 hours of combined clinical or field rotations within any 24-hour period.

In those cases where the student is unable to be present for his shift, the student must request and receive approval to drop or trade that shift.

The student should be in the designated area of rotation unless otherwise directed by the Clinical Staff or Preceptor.

The scheduling process for rotations will be outlined in class. Under no circumstances will a student be credited for a rotation if they are not signed up for the rotation on the appropriate calendar.

It is the student's responsibility to bring to the attention of the Lead Instructor or Clinical Coordinator any problems that they encounter regarding any component of the rotations including difficulty scheduling, etc.

For all rotations you should arrive 10 minutes prior to your scheduled start time.

Successful completion of any given clinical rotation means that you arrived on time, left on time, spent your time on the clinical unit, participated in care at the appropriate level, and were judged as competent by your preceptor, as evidenced by completion of a rotation evaluation forms including supporting call reports.

In regard to Field Internship ride time, students must ride with an approved preceptor from ECEMS and should be riding with the scheduled preceptor. The Clinical Coordinator must be notified of any deviation from the assigned preceptor.

Any issues between a student and staff member at a clinical site must be immediately reported to the Clinical Coordinator. Students should not argue with staff under any circumstances.

Students are expected to attend all clinical experiences appearing and acting professional at all times. This includes wearing a clean program uniform, following appropriate hygiene practices, having their name badge displayed, and be clean shaven.
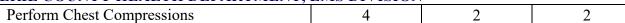
Terminal Competencies Requirements

The Terminal Competencies for graduation from the Erie County Health Department Paramedic Program are listed below. Each item is followed by the minimum number of contacts or experiences required to fulfill the Terminal Competency. Terminal Competencies are completed through a combination of classroom/laboratory experiences, clinical rotations, and ride time with an approved Field Mentor/Preceptor. It may be necessary in some cases for students to complete additional field and/or ride rotations to achieve the Terminal Competencies for the program. All Terminal Competencies will be tracked using the program designated clinical management system application. The Terminal Competencies are divided into those that need to be completed for formative and those that must be completed by course end (summative).

Psychomotor Skills

The student must demonstrate the ability to safely perform the following skills:

Skill	Total #	Formative #	Summative #
Establish IV Access*	27	2	25
Administer IV Infusion Medication	4	2	2
Administer IV Bolus Medications**	12	2	10
Administer IM Injections	4	2	2
Establish IO Access	6	4	2
Perform PPV with BVM	14	4	10
Perform Oral Endotracheal Intubations***	12	2	10
Perform Endotracheal Suctioning	4	2	2
Perform FBAO removal using Magill Forceps	4	2	2
Perform Needle Cricothyrotomy	4	2	2
Insert Supraglottic Airway	12	2	10
Perform Needle Decompression of the Chest	4	2	2
Perform Synchronized Cardioversion	4	2	2
Perform Defibrillation	4	2	2
Perform Transcutaneous Pacing	4	2	2

Perform Chest Compressions	4	2	2

*Students must document all attempts and report success rate. The Program Medical Director may require additional IVs for students with low success rates.

**Students must document all attempts and report success rate. The Program Medical Director may require additional bolus attempts for students with low success rates.

***Students must document all attempts and report success rate. The Program Medical Director may require additional ETs for students with low success rates.

Ages

The student must demonstrate the ability to perform a comprehensive assessment on the following patients based on age group (pediatric, adult, geriatric) as follows:

Age Group	Total #	Formative #	Summative #
Pediatrics (Birth to 18 years of age*)	30	15	15
Adults (19 to 65 years of age)	60	30	30
Geriatrics (Older than 65 years of age)	18	9	9
Total	108	54	54

*Out of the 30 Pediatrics patients, all students must encounter each of the following at a minimum:
- o 2 newborns (birth to 30 days)
- o 2 infants (1 to 12 months)
- o 2 toddlers (1 to 2 years)
- o 2 preschoolers (3 to 5 years)
- o 2 school age/preadolescent children (6 to 12 years)
- o 2 adolescents (13 to 18 years)

Pathologies

The student must demonstrate the ability to perform a comprehensive assessment on patients based off their medical pathologies as follows:

Pathologies	Total #	Formative #	Summative #
Trauma (i)	27	18	9
Psychiatric/Behavioral (ii)	18	12	6
Normal Obstetric Delivery	3	2	1
Complicated Obstetric Delivery (iii)	3	2	1
Distressed Neonate (iv)	4	2	2
Cardiac Pathologies or Complaints (v)	18	12	6
Cardiac Arrest (vi)	3	2	1
Cardiac Dysrhythmias (vii)	16	10	6
Medical Neurologic Pathologies/Complaints (viii)	12	8	4
Respiratory Pathologies/Complaints (ix)	12	8	4
Other Medical Conditions/Complaints (x)	18	12	6

i.   Minimum of one (1) pediatric and one (1) adult trauma simulated scenario must be successfully completed prior to summative field internship.

ii. Minimum of one (1) psychiatric simulated scenario must be successfully completed prior to summative field internship.

iii. Minimum of two (2) complicated obstetric delivery simulated scenarios must be successfully completed prior to summative field internship including a prolapsed cord and a breech delivery.

iv. Minimum of one (1) distressed neonate following delivery simulated scenario must be successfully completed prior to summative field internship.

v.   Minimum of one (1) cardiac-related chest pain simulated scenario must be successfully completed prior to summative field internship. Any patient with ST segment changes will also count as a Cardiac Dysrhythmia.

vi. Minimum of one (1) cardiac arrest simulated scenario must be successfully completed prior to summative field internship. Cardiac Arrest also counts as a Cardiac Dysrhythmia.

vii. Cardiac Dysrhythmia patients are any patient that have a cardiac rhythm that is not Normal Sinus Rhythm.

viii. Medical Neurological Pathologies/Complaints refers to Syncope, Stroke, TIA, or AMS. Minimum of one (1) geriatric stroke simulated scenario must be successfully completed prior to summative field internship.

ix. Minimum of one (1) pediatric and one (1) geriatric respiratory distress failure simulated scenario must be successfully completed prior to capstone field internship.

x.   Other Medical Conditions/Complaints refers to GI, GU, Abdominal, Infectious Disease, Endocrine, OD, Hematology, or ENT Patients. Minimum of one (1) geriatric sepsis simulated scenario must be successfully completed prior to summative field internship.

Formative vs Summative

Formative requirements are experiences in which the student can be coached and have feedback provided throughout the experience. This can also include experiences in which the student receives little to no feedback until the end of the experience.

Summative or competency requirements are experiences that occur after the formative requirement has been satisfied and in which the student is receiving little to no feedback during the experience from the preceptor/instructor.

Patient Assessment/Management/Team Leader Skills

The student must conduct a competent patient assessment and management plan while serving as a Team Leader or Team Member during Field Experience for at least 30 patients. The student must serve as the Team Leader by managing all aspects of the scene, performing the patient assessment, directing medical treatment, and determining transport during Field Internship (Capstone) for at least 20 patients with minimal to no assistance. Only ALS patients can be counted for satisfying these requirements. Field Experience and Field Internship must be completed on a transporting ALS EMS unit.

To be counted as a Team Lead, a paramedic student must do the following:
- Conduct a comprehensive assessment.
- Establish a field impression.
- Determine patient acuity.

- Formulate a treatment plan and direct the treatment.
- Direct and participate in the transport of the patient to a medical facility, transfer of care to a higher level of medical authority, or termination of care in the field.

Action Plan for Failing to Meet Terminal Competencies

As previously stated above, all students must successfully complete all the criteria listed above. If a student fails to complete an objective within the minimum clinical hours, students will be assigned extra clinical shifts by the Clinical Coordinator until that objective is met. Students may also complete some objectives in a simulation as a last resort at the discretion of the Paramedic Program Director.

Clinical Hour Requirements

The following are the locations and the minimum hours that a student must complete in order to successfully complete the program.

- 96 hours ED
- 8 hours CCU/MICU
- 8 hours TICU
- 8 hours Neuro ICU
- 4 hours OR
- 4 hours Endovascular Lab
- 16 hours L&D
- 4 hours Inpatient Physical Therapy
- 8 hours Burn Unit
- 4 hours Dialysis
- 8 hours CPEP
- 8 hours Nursing Home
- 24 hours Pediatric ER
- 2 hours EMD-ADI Dispatch Center
- 8 hours Erie County Jail
- 4 hours Cadaver Lab
- 1 hour REMS Co Meeting (WEREMS or Big Lakes)
- 1 hour WREMAC Meeting
- 72 hours Ambulance Ride Time
- 120 hours Ambulance Internship

These hours are MINIMUM requirements and are subject to change based off student performance, preceptor evaluations, and outstanding terminal objectives at the discretion of the Paramedic Program Director and the Clinical Coordinator. Students can also voluntarily pick up more shifts for additional practice as long as it does not hinder other students from completing their requirements.

Use of Skills at Clinical

The paramedic student must demonstrate competency in all advanced level skills prior to performing any skill on a clinical rotation.

- Approval to perform a skill will be based upon demonstrating proficiency in skills evaluations.
- Students will be signed off upon successful demonstration of competency in a skill. The lab coordinator/ CIC will mark the student's skill log in the appropriate area(s).
- All students will perform skills at the discretion of the rotation preceptor. Students are not allowed to undertake any patient care intervention without the expressed permission of the rotation preceptor. Not all skills can be practiced on all rotations at every clinical affiliate.
- Any student performing a skill without the permission of the rotation preceptor, or above the current level of training, will be dismissed from the rotation site and face disciplinary actions and possible dismissal from the program. Under no circumstance should a student perform a skill for which the student has not been approved, regardless of if asked to do so by the Affiliate staff. The student is responsible for informing the Affiliate staff of their status on performing any skills. The student is responsible for his/her actions in the clinical setting.

Absolutely no ALS skill may be performed outside of an approved clinical education setting. Performing advanced skills when not trained or permitted to do so is considered practicing medicine without a license. Any student that is found to be in violation of any of the above outlined items may face discipline including, but not limited to, clinical suspension and dismissal from the Paramedic Program. Students may only practice their skills while on regularly scheduled clinical or field internship rotations.

Students are expected to fully participate in rotations in regard to BLS skills.

Accidents/ Injury/ Incidents During Clinical Experiences

Any student who is injured during a clinical agency experience must be examined and treated in the emergency department and/or by a private physician. The Lead Instructor needs to be notified of the injury as soon as possible by the student. Health clearance must be obtained from the Paramedic Program Director before the student can return to the clinical agency. Relevant incident reports for the agency and ECEMS, must be completed by the faculty and student. Students are responsible for all payments for medical care related to exposure/ injuries/illnesses while in the program.

Clinical Evaluation

There will be performance evaluations during each clinical rotation. These are designed to evaluate the student's progress to date and provide feedback for improvement. The clinical faculty will directly observe the student in the clinical setting and evaluate him/her. In addition to the evaluations described, the student will also be evaluated on his/her professional conduct and attitudes. This will also be considered in establishing the grade.

The evaluation process is designed to integrate the student's ability to perform professional skills along with their knowledge and attitudes regarding safe, effective and empathetic care, and to demonstrate their knowledge of the basic theories and background information presented during the didactic phase of the course.

Clinical Scheduling & Documentation

All scheduling for clinical will be completed using the Program's designated clinical management system application. Students will be able to self-schedule for all clinical shifts but students must sign up for the shift at least 1 week prior to the start of the shift. It is recommended that students complete at least 1 shift of clinical a week. Any student who fails to schedule a clinical shift for multiple consecutive weeks, fails to attend multiple scheduled clinical shift, or cancels multiple clinical shifts after being assigned may lose the ability to self-schedule and will be assigned shifts from the Clinical Coordinator. It may be possible for students to sign up for shifts under the 1 week deadline but these requests must be approved by the Clinical Coordinator. Students will be able to remove themselves from any clinical shift prior to the 1 week deadline, however, students who need to remove themselves from a shift under the 1 week deadline must do so through notification to the Clinical Coordinator.

Students must use the "Punch In" and "Punch Out" feature on the Program's designated clinical management system application for all clinical shifts. Failure to do so may result in that shift not counting toward clinical requirements for graduation.

All skills performed at clinical, regardless of success, must be documented using the Program's designated clinical management system application. This includes documenting patient information such as age and medical complaint at a minimum.

Every shift must have an evaluation completed by a clinical preceptor at the site. This evaluation will be documented on the Program's designated clinical management system application. This includes having the preceptor sign their signature directly in the program, which may require using the student's device to do so.

All ambulance "ride time" clinical shifts will require that the student complete a PCR for every patient encounter as well as entering all skills and patient information in the clinical management system application. The PCR is found on the clinical management system application as well. PCRs will also be required for any patient that the student assesses in any clinical setting and wants to be recorded to satisfy terminal competencies requirements. This would include documenting a potential treatment plan in the comment section even if you do not execute it.

Due to the requirement to use the clinical management application during each clinical experience, all students are required to bring and use a tablet, cell phone, or touch screen laptop to all clinical experiences.

All documentation from clinical must be completed within 48 hours of the shift being completed. Failure to do so will result in a grade reduction and/or the shift will not be counted towards clinical objectives. Patterns of late and/or incomplete data entry will not be tolerated.

Clinical Suspension

Students may be suspended from clinical for the reasons listed previously in this manual and for reasons the Clinical Coordinator deems fit, including, but not limited to:
- Being tardy to two clinical shifts
- Any uncommunicated absence
- Failure to input shift data in a timely manner
- Participating in clinical when not scheduled to do so
- Disabled due to injury or illness

The student will remain on Clinical Suspension until a meeting is arranged with the Clinical Coordinator and the reasons behind the suspension are discussed and the student's clinical progress is evaluated.

Excessive suspension from clinical will result in the student falling behind in their clinical coursework and may result in dismissal from clinical and the Paramedic Program altogether.

Field Internship

In order for a student to begin the Capstone Field Internship, they must meet the following criteria:
- Successfully complete all portions of classroom sessions, lab skills training, and all written and practical evaluations
- Maintain Current AHA BLS for Healthcare Providers, Advanced Cardiac Life Support (ACLS), and Pediatric Advanced Life Support (PALS).
- Be in academic good standing with the Paramedic Program
- Be in financial good standing with the Paramedic Program
- Complete all requirements and documentation of the Clinical Learning Experience
- Must receive Authorization from the Clinical Coordinator, Paramedic Program Director, and Medical Director

Students must complete a minimum of 120 hours of Field Internship and must act as the team leader for at least 20 ALS patients. Students can only complete Field Internship hours with an ECEMS approved preceptor. All documentation must be performed using the Program's clinical management system application. A PCR must be completed for every patient encounter.

Internship Points to Remember

- Students must always function as a third rider and never as a member of the crew.
- Internship requirements can only be completed during pre-scheduled shifts through the Clinical Coordinator and documented through the Program's clinical management system application.
- Students may not receive Internship credit while working at their primary agency, unless a student's agency is providing wages throughout the entire course as a condition of their employment. Students cannot perform any other duties outside of the student role and cannot count for staffing requirements while attending a clinical or internship shift. Students cannot be substituted for paid staff while at clinical or internship.
- While working, students may not perform skills or assessments for Internship credit.
- While meeting internship requirements, students must always be in a program's uniform and identify as an ECEMS paramedic student.
- All documents must be legible and clear.
- Preceptor's first and last name should be printed separately, in case of confusion, or illegible signatures.
- The field preceptor must be with the student when performing all skills.
- Only EMS agencies with current Affiliation Agreements with ECEMS may host a student.
- All preceptors must be pre-approved and have attended a preceptor orientation program.
- If a student wants to fulfill internship requirements at an agency not affiliated or with a preceptor who has not been pre-approved, it must go through the Clinical Coordinator and be presented with enough time to secure an agreement and preceptor approval.
- Only one intern will be allowed on a responding unit at a time.

- Use 24-hour notation ("military time") to document time.
- Each ALS patient exposure and assessment, skills, and treatment must be documented in the Program's clinical management system application.
- Students must have a completed a post-shift evaluation for each Internship shift.
- Students must have the preceptors complete the electronic evaluation on them.
- All preceptors must register with the online link. Preceptors may view your clinical paperwork to understand your skills and objectives more clearly.
- Any and all incidents or unusual events must be reported to the Clinical Coordinator, Program Director, or Medical Director. Hearing about an event from a preceptor or Ambulance service without prior knowledge is not looked upon favorably.
- In the event that a student is sick or cannot make a shift, please EMAIL the Clinical Coordinator, and call the ambulance service contact to report your absence PRIOR to the shift. Lack of respect for this policy may result in program dismissal.
- ECEMS staff is here to help, please ask if you have questions.

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Student Acknowledgement

By signing below, I acknowledge that I have been informed of all policies, procedures, and expectations of the ECEMS Paramedic Program and I agree to follow them.

Print Name: _____

Signature: _____

Date: _____