



**Paramedic
Clinical Handbook
2023-2024**

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INTRODUCTION

The Emergency Medical Service (EMS) Training Program faculty and staff will strive to provide opportunities for students to build upon principles and skills taught in the classroom and laboratory. The EMS process will be utilized as an integral part of guidelines for the pre-hospital care practice.

The faculty believes that students have a fundamental responsibility to provide care to all patients assigned to them and that refusal to care for patients, including patients with blood-transmitted diseases, conflicts with the ethics of the EMS profession. We believe EMS Professionals have a moral commitment to patients and a special responsibility to exemplify the standards of ethical behavior. The faculty will provide intensive education and counseling when students feel apprehensive or have concerns regarding clinical or patient assignments.

Clinical supervision and planned instruction will be provided by a licensed preceptor in the clinical setting. The student has the responsibility to use initiative and self-direction in making the most of his/her clinical opportunities to gain greater understanding, knowledge, and experiences in all patient care areas.

The clinical experiences will be in the following areas: pre-hospital field, emergency departments, intensive/coronary care units, surgical, laboratory, pediatrics, labor and deliver, psychiatric, dialysis and medical clinics. All didactic and laboratory skills will be integrated throughout these rotations.

Students' performances will be evaluated by their clinical preceptors on a daily basis. Minimum competency skills and affective behaviors will be evaluated and documented. Grading of the clinical rotations will be separate from classroom/laboratory grading.

Students will understand and abide by the clinical policies as outlined in this handbook for successful completion of the Paramedic program.

"The Kiamichi Tech Paramedic Program is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP)."

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APPROVAL/ACCREDITATION

The NWTC/Kiamichi Tech EMS Training Program is approved by the Oklahoma State Department of Health, EMS Division (OSDH-EMS) as an EMS Training Center. Graduates of this state-approved program are eligible to apply to take the National Registry of EMTs (NREMT) licensing examinations (computer based and practical skills testing). Applicants must meet all OSDH-EMS and NREMT requirements to hold a Paramedic license. In addition to completing a state-approved Paramedic licensing examination, requirements include submission of an application for licensure, a criminal history records search, and evidence of citizenship or qualified alien status. To be granted certification, an applicant must have the legal right to be in the United States (United States Code, Chapter 8: Section 1621). For further information on EMS license, please refer to your State licensing rules and regulations.

OSDH-EMS and NREMT has the right to deny a license to an individual with a history of criminal background, disciplinary action on another health-related license or certification, or judicial declaration of mental incompetence [59 O.S. {567.8}]. These cases are considered on an individual basis at the time application for licensure or renewal is made.

Kiamichi Tech EMS program is approved by the Oklahoma Department of Career and Technology Education. The program has received national accreditation status through the Committee on Accreditation of Educational Programs for the EMS Professions (CoAEMSP) in conjunction with CAA HEP. The EMS program also is approved as an American Heart Association Training Center.

EMT LICENSE

Paramedic students MUST have an Oklahoma and/or NREMT EMT, EMT Intermediate or AEMT license prior to enrolling in the class and conducting clinical rotations. A copy of the license must be on file prior to the first scheduled date of Paramedic class. This license must remain in effect throughout the Paramedic program. If for any reason the EMT or AEMT licenses/certifications lapse, the student will be dropped from the program.

ATTENDANCE

1. **Scheduling:** All clinical rotation scheduling will be done through the Northwest Tech BIS Health Coordinator or Clinical Coordinator with Kiamichi Tech. If the CC is unavailable, the program instructor will assist the student.
2. **Absences:** Any problems with scheduling are to be addressed to the BIS Health Coordinator and Lead Instructor immediately. Students are expected to attend all scheduled clinical rotations. If a scheduled clinical is missed without notifying the BIS Health Coordinator or the Instructor 24 hours prior to the scheduled rotation, the student will be counted absent.
 - a. Excused absences: Illness, family, or employment emergency must be explained in writing to the CC and Instructor within 72 hours of the missed clinical. A decision will be made concerning the excused absence and reported to the student in a counseling session as soon as possible.
 - b. Unexcused absence: The student will be counseled with a verbal warning after one unexcused absence. After two unexcused absences in the clinical rotations the student will be placed on probation for the entire program. Three unexcused absences will result in dismissal from the program.
 - c. Canceling or changing clinical rotations on a continuance basis will result in verbal warning, and then probation.
3. **Tardies:** The student will be counseled at one tardy and placed on probation, when they have been tardy three times s/he will remain on clinical probation for the entire clinical program.
4. **Leaving:** Leaving the clinical site without prior notification to the preceptor will result in an unexcused absence resulting in probation.
5. **Lack of Concern for Training:** The student who demonstrates a lack of appropriate concern for training may be sent home by the preceptor with an unexcused absence. This includes, but is not limited to sleeping in class/clinical or showing up to class/clinical unprepared or out of uniform.

CLINICAL POLICIES AND PROCEDURES

1. **Rules and Regulations:** The student must adhere to all the other specified clinical guidelines specified in the Paramedic Handbook, KIAMICHI TECH & NWTC Campus Handbooks and the individual clinical site rules and regulations.
2. **Arrival at Clinical Site:** The student is expected to be on time at all scheduled clinical shifts in the appropriate attire (see uniform requirements). Upon arrival the student will show the preceptor his/her clinical objectives. The student should confirm that the preceptor understands the purpose/goals of the Paramedic student's clinical rotation.
3. **Reporting to Preceptor:** Upon arrival to the clinical area, the student will immediately make contact with the preceptor. If the preceptor is unavailable, the student should contact the department or agency supervisor.
4. **Attitude:** The student shall at all times maintain a professional attitude towards the staff, as well as the patient and family members.
5. **Confidentiality:** The student will maintain the patient's confidentiality at all times.
6. **Breaks/Lunch:** Once a student enters a clinical setting, s/he is expected to stay. The student may have two 10-minute breaks and 30 minutes for lunch. S/he will perform appropriate objectives, and assist the staff as needed within reasonable guidelines.
7. **Scheduling:** Clinical rotation scheduling will be done through the Kiamichi Tech Clinical Coordinator (CC) or designated person at the distance learning site. If it is necessary to change a clinical date, it is the student's responsibility to notify the CC as soon as possible (minimum 24 hour notice).
8. **Weapons/Substance Abuse:** No weapons/firearms, illegal drugs or alcohol, are allowed during the clinical rotations, school, etc. This includes alcohol on your breath. Students must follow KIAMICHI TECH substance abuse policy throughout the program (see handbooks)
9. **Clinical Supplies:** Materials necessary to have on hand at the clinical site: clinical packet with objectives, watch, scissors, stethoscope, black pen, small note pad, textbook, safety vest, protective eye wear, and your pictured ID (supplied by Kiamichi Tech or distance learning campus).
10. **Preparedness:** If you come to the clinical site unprepared, i.e.: without your clinical packet, proper uniform, nametag, etc.; you may be asked to reschedule your clinical for a date that you will come prepared. If this does occur, this time will be considered an unexcused absence on your record.

11. **Disputes:** In the clinical setting, the saying, "The preceptor is always right," will apply in almost all situations. As students, you are their responsibility and it is our privilege to be in the clinical setting. Though in all cases, this will not jeopardize the patient's care.
- a. Personal conflicts or disagreements with a preceptor or staff member must be handled in private, and at times when patient care will not be compromised in any manner. The preceptor has final responsibility for clinical/patient care decisions; students are directed to follow all clinical instruction of the preceptor. If a student feels that care rendered by a preceptor is inappropriate, the student will relinquish all care of the patient to the clinical preceptor and contact the course CC or Instructor immediately.
12. **Time Confirmations:** Your daily performance sheets are to be filled out by you prior to leaving the clinical site. This does not include assignments, such as pathophysiology reports. Your **preceptor must sign the time and time out**, or it will not be accepted.
13. **Pathophysiology Reports:** When describing the pathophysiology of the medical diagnosis where designated on your clinical sheets, be sure to include the name of your reference material, the author, and page number. All Pathos will be legible and a minimum of 200 words each.
14. **Documentation:** The student should retain all evaluation sheets for a particular clinical area until that area (all rotations) has been completed. Evaluation sheets are necessary to receive credit for that rotation. **Lost documentation is the student's responsibilities.** Suggestion: do not take *completed* clinical paperwork to your clinical sites, in case it is misplaced or lost. **Once lost, you will have to repeat those rotations.**
15. **Conduct:** Students are expected to abide by the rules and regulations of the EMS Program and the clinical facilities. A counseling statement will be completed and placed in the student's file should any problem arise or result in probation or dismissal from the program. Again, remember your performance may or may not lead to future references.
- a. If a student excels in any given circumstance s/he will have a written statement to that effect.
16. **Post-Graduation:** Once all clinicals and all course requirements are met and you are an official graduate of the paramedic program, this state does not allow you to perform any advanced skills until you receive your license. This includes even when you are in the ambulance as an employee and working with a person that is licensed at an advanced level.
17. **Inappropriate Behavior:** Preceptors, patients, patient's family, and staff members will be treated in a courteous and appropriate manner. Lewd or defamatory statements or actions will not be tolerated at any time while at the clinical site. **The use of loud, rude or defamatory statements or disrespect in the clinical sites will result in probation or subject to dismissal from the program.**
18. **Employment:** Clinicals may not be done while the student is on regular work duty. All ambulance rides must be done while the student is a "third rider" and not a member of a two-person crew responsible for patient care. Performing advanced skills or representing yourself as a Paramedic before you are licensed is illegal and can be prosecuted outside of the proper clinical setting.

19. **Skill Competency:** Competencies and patient contacts may **NOT** be complete or signed-off on while on duty. All competencies must be completed while performing as a student third rider or in the hospital as a student during a program scheduled clinical rotation.
20. **Clinical Rotation Location:** Students cannot perform clinical rotations at the facility or service where they are employed. This will prevent any conflict of interest with staffing, supervisors, or liability issues that may arise. **NO EXCEPTIONS.**
21. **Driver's Compartment:** At no time shall the student be allowed in the drivers' compartment while the vehicle is in motion and a patient is on board. Again, if a patient is being transported, the student must remain with the patient and preceptor.
22. **Seat Belt Use:** While the vehicle is underway, the student shall be seated in the patient compartment. The student shall be wearing his/her seat belt at all times unless patient care dictates otherwise.
23. **PPE/BSI:** The student will follow all recommended universal precautions at **ALL** times when performing any patient care procedures. No exceptions.
24. **Disciplinary Procedures:** Once a student is placed on probation a plan of action will be documented and recommendations must be followed. Students may receive verbal warnings, probation, suspension or dismissals for any violation of the Program or Clinical Facility/Service rules and regulations.
25. **Safety Vests:** Students must wear their reflective safety vests during any situation that puts him/her in danger such as highway traffic scenes.
26. **EMS Capstone (Leadership) Rides:** Students must do leadership rides under a Kiamichi Tech approved trained and orientated preceptor. See Capstone vs Team Leads definition at end of this manual.
27. **Clinical Competencies:** Competencies will only be accepted that are completed while serving in the role of a student. Student's names must be on an approved school clinical calendar for the date of the required minimum competencies to be met. Doing skills outside of the roll of a student can result in dismissal from the program, and may create a liability issue for the student, school and/or service.

IMMUNIZATION GUIDELINES

Evidence of immunity must be completed and on file by the first day of paramedic class. Each student must provide evidence of immunity against the following diseases:

1. Tuberculosis
2. Rubeola
3. Rubella (German measles)
4. Mumps
5. Hepatitis B
6. Varicella (Chicken pox)
7. Tetanus and diphtheria
8. Influenza vaccine
9. Flu as required
10. Covid as required

UNIFORM REQUIREMENTS

- **Identification:** The student must wear an approved picture ID while in the clinical sites which states EMS or Paramedic Student.
- **Jewelry/Tattoos:** While in the clinical setting the student may wear a minimum amount of jewelry. Only one pair of stud earrings (in lower lobe of ears) will be accepted. Rings should be kept to a minimum due to the safety factor, especially on the ambulance. Tongue rings are NOT allowed in the clinical setting. No body piercings or tattoos should be visible while in clinical sites.
- **Uniforms:** The uniform must be cleaned and pressed without damage or stains. Uniforms must not be binding or constricting, but allow for ease of movement while bending or reaching. Shoes should be clean and polished.
- **Hair:** Hair will be kept neat and clean. Long hair must be worn pulled back from the face while in the clinical setting. Extreme hair fashions, colors or ornaments are not permitted. Men should be clean shaven or neatly trimmed.
- **Nails:** Fingernails must be kept clean and neatly trimmed and must not extend beyond the fingertips. No acrylic nails/extensions or polish is allowed.
- **Hygiene:** Good personal hygiene must be maintained at all times. Cologne/perfume is not permitted.
- **Personal Wear:** appropriate foundation garments will be worn and not visible.
- **Safety Vest:** are provided and must be worn while in hazardous conditions such as MVCs
- **Clinical Uniform** will consist of:
 - Black pants (no jeans)
 - NWTC/Kiamichi Tech polo uniform shirt
 - Black belt
 - Black socks & shoes (no tennis shoes)

****Some clinical sites may require a special uniform, such as operating room, i.e.: scrubs***

****The EMS Director must approve any uniform change***

****Gum and smokeless tobacco are prohibited***

INCIDENTS AND ERRORS

1. All incidents and/or errors must be reported **immediately** to the preceptor and the supervisor of the preceptor.
2. The patient's doctor will be notified of incident for appropriate action to be taken if deemed necessary by the nurse in charge or EMS supervisor.
3. An incident report will be completed by the student involved. The report will be filed according to the facility policy and a copy will be retained by the instructor in the student's file.
4. If a student is involved in an incident, it must be reported to the CC and EMS Instructor **immediately**. The incident report will be completed and copies filed with the hospital and school.
5. Any medical cost incurred as a result of an incident or error will be the sole responsibility of the student or the student's medical carrier. (i.e., needle stick will result in E.D./lab visit, etc.)

INTRAVENOUS (IV) THERAPY

To initiate IV therapy the student must:

1. Pass the Pharmacology/IV Therapy theory examination and laboratory skills
2. Be supervised by a nurse or phlebotomist for 8 hours in the lab, ICU or E.D.

MEDICATION ADMINISTRATION

To administer medication the student must:

1. Pass the Paramedic Preparatory course
2. Pass the Pharmacology and IV theory examination and laboratory skills
3. Be supervised by a nurse, physician, or paramedic in the first 100 hours of clinical rotations (IV. OR, ICU, E.D.)
4. Report medication errors immediately to preceptor/supervisor, CC and instructor

PERFORMING NEW PROCEDURES

When performing a new procedure the student must:

1. Check for written physicians' order on the patient's chart or echo the orders back to the physician
2. Review the procedure in the protocol or procedure book
3. Assemble needed supplies and equipment
4. Discuss the procedure step-by-step with your preceptor prior to entering the patient's room
5. Explain the procedure to the patient
6. Perform the procedure under supervision with your preceptor
7. Be prepared to critique and evaluate your performance with the preceptor/instructor after performing the procedure

SAFETY PRECAUTIONS

A safe environment implies freedom from injury with focus on helping to prevent falls, electrical injuries, fires, burns and poisonings. The student must be aware of potential safety problems, including workplace violence, terrorism and bioterrorism; and must know how to report and respond when safety is threatened. Therefore, the student will:

- Be knowledgeable of use of all equipment and supplies.
- Check all equipment and supplies for defects or damages before each use and report any discrepancies immediately.
- Handle equipment carefully to prevent injury to yourself and others.
- Store all equipment and supplies in the proper location.
- Use principles of body mechanics when lifting, pulling or pushing objects.
- Remove any hazardous objects or spills from the floors or patient care area immediately.
- Minimize distractions; concentrate on the procedure being performed.
- Any questions about your ability to perform a procedure should be discussed with a preceptor or instructor.
- Never run in rooms or hallways.
- Know the procedure to report/implement a facility's emergency codes.
- Faculty should be notified immediately of pregnancy or other medical condition. Student's clinical assignments may need to be made to prevent exposure to radiation and highly communicable diseases—if possible.

CONFIDENTIALITY POLICY

In accordance with Health Insurance Portability and Accountability Act (HIPAA) Kiamichi Tech has adopted the following policy:

1. Except within the structured, teaching-learning situation, all aspects of the patient/client's medially-related information, and/or data shall not be discussed with any other person or persons under any circumstance.
2. Proper identification as stated in the Kiamichi Tech Student Uniform requirements is required before reading charts/records.
3. Under no circumstances is the student to photo copy or record in any way any part of the patient's charts/records.
4. Under no circumstances is the student to remove from the Affiliate premises any reports or records pertaining to any patient/client.
5. Student may become privileged to Affiliate information which is considered private. Students who divulge Affiliate or patient information acquired during this course will be **immediately** dismissed from the EMS Program.
6. Failure to honor the basic ethical right of the patient or Affiliate may result in the **immediate** dismissal of the student from the EMS program.

Student recognizes that the disclosures of confidentiality information may give rise to irreparable injury to the patient or owner of such information, and that accordingly, the patient or owner may seek such LEGAL remedies against the student.

FIELD/CLINICAL GRADING

Field/Clinic Grading: At the minimum, students will be evaluated on clinical performance by the CC and/or Instructor after every clinical rotation. On rotations longer than 32 hours the student will be evaluated at least three times. Input from agency staff will be reflected on the Hospital/Clinic Evaluation Form completed in each clinical rotation which occurs in the hospital or a clinic. KIAMICHI TECH will use the 9-week EMS Clinical Evaluation Grading to measure the student's clinical performance in the following areas:

- A. EMS Patient Care Process
 - 1. Data Collection
 - 2. Analysis
 - 3. Planning
 - 4. Implementation
 - 5. Evaluation
- B. Professional Behavior
- C. Communication

Total possible points for each rotation = 100 points
Passing points = 80 points

Failure in a clinical rotation or dropping below an 80% average during a longer rotation places the student on probation. If the student fails a rotation the student must repeat and pass that rotation after re-training, remediation and counseling. If the student fails that rotation again, they will be dismissed from the program. If the student drops below an 80% during a longer rotation, the student will be retrained, remediated and counseled as necessary and then re-evaluated after three more shifts. If the student is still below an 80% the student will be placed on permanent probation and pulled from all clinical rotations until retrained, remediated and counseled as necessary a second time. The student will then be monitored for the next three shifts. If the student is still below an 80% it will be considered a failed rotation.

- A student failing clinical rotations is not a safe practitioner and will be dismissed from the program.
- Students are required to complete a minimum of 8-16 hours per week to remain in the program.
- Students that do not have the required hours completed for the month will be placed on probation. The hours must be made up in the next month along with the hours due for the current month. If this is not done, the student may be dismissed from the program.
- Students must complete certain clinical rotations before continuing on into other rotation sites, and only after completing all theory and lab skills for each area.
 - IV and OR must be complete prior to receiving ICU/CCU packet
 - ICU/CCU must be completed prior to receiving E.D. packet
 - E.D. and field may be simultaneous
 - L&D packets after OB-GYN theory/lab evaluation
 - Pediatric after all pediatric theory/lab evaluation
 - Psychiatric after all behavioral theory/lab evaluation
 - Capstone after ALL

FIELD ROTATIONS AND EMS LEADERSHIP

EMS Field Rotation: Students are allowed to begin field rotations after completion and documentation approval of ICU/CCU, Lab and Surgery. **Capstone** is completed after all other components are successfully completed.

EMS Hours: The Student is required to complete a minimum of 220 hours with an Advanced Life Support service with Paramedic on protocols. **The individual services will have separate guidelines as to shift scheduling.** These are only minimum hourly requirements; student will have to obtain minimum patient contacts or competencies to graduate. If the student does not receive the minimum requirements in the 220 hours, then s/he will have to continue clinical rotations until completed. NWTC/Kiamichi Tech staff advises students to seek clinical sites that are conducive to learning (field training officers/preceptor training program) and have a higher call volume. This may require some extra travel time, but may be beneficial in added hours for clinical rotations to receive the minimum patient contacts or leadership rides.

The Paramedic student is required to complete a minimum of 220 hours in EMS. These hours will be divided into the EMS Field internship and the Capstone phases. The Field hours will consist of a minimum of 120 hours.

The Capstone packet will be given to the students after successfully completing all the phases of his/her education and will be a minimum of 100 hours. All knowledge, skills, hospital, and 120 hours of field rotations must be successfully completed **prior to receiving** the Capstone packet. Plus, the approved preceptor and ambulance director must attest to the fact the student is ready for his/her Capstone phase of leadership rides.

Field Internship Grading: Daily Field Internship Affective Evaluation forms will be completed on FISDAP by your approved preceptor(s) prior to you leaving the field rotation shift/site.

If you are scored low by your EMS Preceptor, then it is highly recommended you discuss the problems with your Preceptor prior to the end of your shift and receive detailed suggestions for improvement.

The preceptor should meet with you at the end of your shift for debriefing and evaluation.

EMS PRECEPTOR

Preceptor Approval: The Paramedic student must have a program approved preceptor prior to receiving the field clinical packets. The preceptor should have an approved preceptor training program if available prior to be chosen by the Paramedic student.

Preceptor Training Program: National Accreditation requires that Kiamichi Tech EMS has a preceptor training program in place to assure quality clinical rotations occur during Paramedic training. Kiamichi Tech EMS program provides this training for free to any preceptors or services free of charge with approved continuing education units. Contact the Program Director for more information.

Preceptor Contract: Each approved preceptor shall have a Kiamichi Tech Preceptor Agreement on file prior to being accepted as a student's EMS preceptor. A student may have two approved EMS Preceptors for his/her field clinical rotations. See preceptor agreement form.

Choosing a Preceptor: The Paramedic student should select the best preceptor for his/her EMS field rotations. The choice will not be a co-worker, family or friend that may not give honest feedback on the student's performance. Students **CANNOT** conduct EMS Field rotations at a service where s/he is employed. Students should seek a variety of services/agencies to conduct clinical rotations for the knowledge, understanding and experiences of all EMS agencies rather good or bad.

Preceptor Characteristics: The following are considerations when choosing an EMS Preceptor:

- Good communications skills
- Establishes a climate conducive to learning
- Shares practical steps in patient care
- Is patient and remains calm in all situations
- Provides positive and corrective feedback at all times
- Listens to the student
- Has knowledge within the field and scope of practice
- Allows the student to assume EMT-P lead role in decision making
- Stimulates critical thinking skills
- Use non-patient care times for skills, explanations and discussions
- Promotes teamwork
- Remains positive, avoids the negative
- Empowers the student
- Great role model

Preceptor Evaluation: The student will complete an evaluation of the preceptor(s) after each shift. Please be honest in assessing your preceptor for future student's options. See Student Evaluation of Preceptor form.

MINIMUM REQUIRED CLINICAL HOURS

Lab	8
Operating Room	16
Critical Care	32
Emergency Department	40
Emergency Department with Physician	60
Dialysis	8
Psychiatric	8
EMS Field	120
Labor and Delivery	16
Pediatric	32
EMS Capstone Internship	100
Medical Director	<u>8</u>
<u>Total</u>	448

NOTE: These are minimum hours. If the required competencies and patient contacts are not met and documented, more hours may be required.

CLINICAL PERFORMANCE DOCUMENTATION

1. **Due Date:** The student must successfully and accurately complete ALL clinical hours and packets before the last day of class.
2. **Clinical Time Documentations:** Any daily report that does not have the time in and time out written by the preceptor will not be accepted. *Any times that have been marked, changed or altered in any way, will not be accepted and the student will be required to repeat those hours and marked absence for that rotation and placed on probation.*
3. **Cheating:** Any student caught changing the times on their daily performance sheet or in Fisdap to make it look like they did more time, will immediately be removed from the program! Once dismissed the student may be reported to the EMS Division of the State Health Department for further actions. If you have trouble completing the clinicals, please come to your instructor and work it out. Do not cheat.
4. **Preceptor Signature:** All students must meet their preceptor in the designated areas prior to beginning the day's rotation. The student must also see the preceptor before leaving the site to have the clinical forms signed. The preceptor **must sign** the time in and time out and fill out appropriate forms in Fisdap.
5. **Clinical packets:** Packets will be handed out to students as the theory and skills are successfully completed for each area. Packets that are in disarray will not be accepted and returned for correction. The packets condition and accuracy will be part of the student's clinical grade.

6. **Clinical Objectives:** Each clinical packet shall have a cover page which gives the minimum requirements/skills/objectives for each rotation. **The student must share this information with their preceptor upon arrival in the rotation.** Also, listed on learning objectives is a list of items the student must complete during that rotation. If you do not understand what is expected of you, please speak with the Clinical Coordinator and/or instructor.
7. **Clinical Evaluation:** The student will have an opportunity to evaluate the clinical site(s) after each shift. Please be honest and give the program feedback on hospitals, clinicals and agencies capabilities as a clinical site.
8. **Daily Performance Sheet:** A daily performance sheet must be completed for each clinical shift. The student will need to describe any and all procedures observed and performed, especially if it is a new technique or skill performed. Remember, the preceptor must sign the form prior to leaving the clinical site.

If times are changed or altered in anyway, the clinical hours will **NOT** be accepted and the student will be required to repeat the hours. If for some reason you need to make a change on the time in and time out, it is recommended to start another daily performance sheet.

9. **Clinical Rotation Tracking Form:** The tracking form helps Kiamichi Tech analyze clinical sites for numbers of patient contacts. This helps the program determine the best sites for students to conduct clinical rotations and helps track the numbers and types of patients we see (i.e.: pediatric, chest pains, intubations). Students need to continue to track their numbers throughout the entire rotation. Clinical tracking may be accomplished using the FISDAP tracker.
10. **Lab Values Worksheet:** Lab sheets will be required with certain clinical rotations. If you have difficulty with the lab values, please ask questions of lab staff or instructors.
11. **Arrhythmia Interpretation:** ECG sheets should be completed for the required clinical rotations. The student is required to attach the ECG strip to the bottom of the form and interpret the rhythm. You may use strips from one clinical area to another. Such as ICU ECG strips can be used in the E.D. packet, especially if it is an interesting case.
12. **Pathophysiology:** Students are required to complete pathophysiology reports during the clinical rotations. Pathos must be legible and a minimum of 200 words each.
13. **Paramedic Clinical Competency:** All students are required to complete the minimum required patient competencies and contacts. Clinical competencies are located in FISDAP. Once the student has successfully completed the minimum requirements, s/he shall continue to document all other patient contacts throughout the clinical rotations. This is a recommendation from national accreditation to show the validity and census of our clinical sites. See Graduation Requirement Report.
14. **Medical Director Clinical:** Each student is required to conduct clinical rotations with the Kiamichi Tech Medical Director or approved **distance site** medical director. Students will have to drive from distance learning sites to complete this requirement. See medical director clinical documentation.

EXAMPLES OF



PARAMEDIC CLINICAL FORMS

Field Internship

The EMT-Paramedic student is required to complete a **minimum** of 120 hours with an Advanced Life Support service with Paramedics on protocols. The individual services will have separate guidelines as to shift scheduling.

Preceptors must be approved by Kiamichi Tech EMS Program prior to conducting field clinical rotations. Only preceptors that have completed the Kiamichi Tech Preceptor Program can be used. The Paramedic who you are requesting approval for should have at least two years of experience in the pre-hospital setting.

Field Clinical Objectives:

1. Students must schedule a rotation through the required calendar setup, and report early to the assigned preceptor for that shift. Student should remain with the preceptor for the shift.
2. Students will help the crew members with all general activities such as equipment and ambulance inspection, cleaning and maintenance.
3. Students will read and understand the rationale of the service's protocols prior to the first shift.
4. Students will participate/observe all ambulance calls, transfers and emergencies.
5. Perform patient assessment including medical history and conducting a physical examination. Minimum assessment skills should include taking and recording vital signs and lung auscultation.
6. Assist and review basic and advanced treatment of trauma and medical emergencies.
7. Assist in scene control and triaging.
8. Assist and observe with obtaining medical control communication.
9. Assist and observe in the transfer of patient's after care.
10. Continue to track the numbers of all patient contacts, such as skills and procedures, age, sex, and chief complaints throughout all the rotations.

Documentation

1. Remember to complete the following in during field internship:
 - Complete one daily performance sheet per shift.
 - Complete two ECG Interpretations for each 8-hour shift
 - Complete one state run sheet for each 8-hour shift
 - Complete one radio report for each 8-hour shift.
2. Remember to complete the following:
 - Document all procedures in Fisdap Skills Tracker.
 - Instruct preceptor to evaluate your performance using the Fisdap evaluations (KT Facility Evaluation of the Student and Professional Behavior Evaluation).
 - Complete the student evaluation of the preceptor (Preceptor Evaluation).
 - Complete the facility evaluation (Site Evaluation).
 - Complete the daily clinical log (time sheet) in the FIELD Clinical Packet.
 - Complete two ECG summary sheets per 8-hour shift.
 - Complete two pathophysiology sheets per 8-hour shift.
 - Complete one radio report for each 8-hour shift.

Student Name:

Student Check-Off:	Clinical Coordinator Check-Off:	Points Poss.:	Points Awarded (Instructor):
	Paper Time Sheet Filled out Completely.	2	
	All shifts entered into FSDAP.	2	
	All shifts signed off/confirmed by preceptor.	2	
	Patients entered correctly and narrative for each patient.	2	
	Evaluation of Preceptor and Site Completed Daily.	2	
	Timeliness of packet.	5	
	Pathophysiology Reports, Lab Sheets, EKGs, etc. (NA for all packets)	10	
Other:			
	Total:	25	
			Total for ER:

Field Internship Tracking

This FISDAP form will show the number of procedures and patients seen for your ambulance rotations. The procedures must be successfully **performed** by you, **not observed**.

Location of Shift: _____ Preceptor Signature _____

<i>Procedure/Age Groups</i>	<i>Numbers</i>
Safely Administer Medications	
Endotracheal Intubations	
Live Intubations	
Safely Gain Venous Access	
Ventilate a Patient without advanced airway	
Assessment of Newborn (0- 1month)	
Assessment of Infant (1 month – 1 year)	
Assessment of Toddler (1-3)	
Assessment of Preschooler (3-5)	
Assessment of School Ages (6-12)	
Assessment of Adolescents (13-17)	
Assessment of Adults	
Assessment of Geriatrics (> 65 years)	
Assessment of Obstetric Patient	
Assessment of Trauma Patient	
Assessment of Medical Patient	
Assessment of Psychiatric Patient	
Assessment and RX of Chest Pain	
Assessment and RX of Respiratory	
Assessment and RX of Syncope	
Assessment and RX of Abdominal	
Assessment and RX of Altered Mental Status	
Assessment of Dialysis Patient	
Assessment and RX of Burn Patient	

Pathophysiology Sheet

Disease / Condition Name(s):
<i>Student Choice:</i>
Signs and Symptoms:
Transmission (if applicable):
Pathophysiology (What does this disease/injury do to the body?):
Prevention:
Prevalence (How many people have this disease/injury? What areas of the country? Certain populations?):
Treatment / Prognosis:
EMS Implications/Special Considerations:

EXAMPLE

Student Name: _____ Date: _____

Attach EKG Here

Add this completed EKG as an attachment to this patient's chart in FSDAP.

During ICU, Attach Lead II strips.
During ICU, Attach 12L EKGs.

EXAMPLE

Rate:	Rhythm:	QRSD:	P wave morphology:	T wave morphology:	Final Diagnosis of rhythm:
Premature Contractions?	PRI:	QRS morphology:	ST Segment:	Treatment Plan:	

Log 10 of these sheets during your ER rotations. Choose patient with multiple studies, although not all will be entered.

Patient Age and Complaint: _____		
Clinical Lab Test and Diagnostic Procedures Worksheet		
Test/Study:	Results:	Interpretation:
Blood Chemistry	Glucose	
	K	
	BUN	
	Creatinine	
	CO ₂	
	Chloride	
	Sodium	
	Calcium	
	Other:	
	Color	
Urine Analysis	Clarity	
	Spec. Gravity	
	pH	
	Leukocytes	
	Nitrates	
	Protein	
	Glucose	
	Ketone	
	Urobilinogen	
	Bilirubin	
Lipids	RBCs	
	WBCs	
	Bacteria	
	Other:	
	Cholesterol	
	HDL	
	LDL	
	Triglycerides	
	Pt	
	INR	
Coag.	PTT	

Test/Study:	Results:	Interpretation:
Cardiac	Troponin	
	CK	
	MB	
	Homocysteine	
	pH	
ABG	PaCO ₂	
	PaO ₂	
	HCO ₃	
	RBCs	
	WBCs	
CBC	Platelets	
	Hgb	
	Hct	
	Differential	
	Neutrophils	
	Eosinophils	
	Lymphocytes	
	Monocytes	
	Monocyt	
	XRAY	
Radiology	CT	
	Ultrasound	
	MRI	
	EGD/Colon.	
Other		

Kiamichi EMS Training Program EMS Radio Report

Age/Gender:	Age/Gender:	Age/Gender:
Chief Complaint:	Chief Complaint:	Chief Complaint:
History of Present Illness:	History of Present Illness:	History of Present Illness:
Pertinent History:	Pertinent History:	Pertinent History:
Level of Consciousness:	Level of Consciousness:	Level of Consciousness:
Vital Signs: BP _____ P _____ RR _____ SpO ₂ _____ EtCO ₂ _____ CBG _____	Vital Signs: BP _____ P _____ RR _____ SpO ₂ _____ EtCO ₂ _____ CBG _____	Treatment/Response: Treatment/Response: Treatment/Response:
Head-Toe Exam:	Head-Toe Exam:	Head-Toe Exam:

Paramedic Professional Behavior Evaluation (Completed in FISDAP)

Name of Student: _____ Date of evaluation: _____

Rating: 1 Fails to Perform
 2 Borderline (inconsistent) ---needs more work
 3 Competent

PLEASE CIRCLE ONE IN EACH CATEGORY

INTEGRITY	1	2	3
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EXAMPLES OF PROFESSIONAL BEHAVIOR INCLUDE, BUT ARE NOT LIMITED TO: CONSISTENTLY HONEST; CAN BE TRUSTED WITH THE PROPERTY OF OTHERS; CAN BE TRUSTED WITH CONFIDENTIAL INFORMATION; COMPLETELY AND ACCURATELY DOCUMENTS PATIENT CARE AND LEARNING ACTIVITIES.

EMPATHY	1	2	3
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EXAMPLES, BUT ARE NOT LIMITED TO: SHOWING COMPASSION FOR OTHERS; RESPONDING APPROPRIATELY TO THE EMOTIONAL RESPONSES OF PATIENTS AND FAMILY MEMBERS; DEMONSTRATING RESPECT FOR OTHERS; DEMONSTRATING A CALM, COMPASSIONATE, AND HELPFUL DEMEANOR TOWARD THOSE IN NEED; BEING SUPPORTIVE AND REASSURING TO OTHERS.

SELF-MOTIVATION	1	2	3
------------------------	----------	----------	----------

EXAMPLES, BUT ARE NOT LIMITED TO: TAKING INITIATIVE TO COMPLETE ASSIGNMENTS; TAKES INITIATIVE TO IMPROVE AND/OR CORRECT BEHAVIOR; TAKES ON AND FOLLOWS THROUGH ON TASKS WITHOUT CONSTANT SUPERVISION; SHOWING ENTHUSIASM FOR LEARNING AND IMPROVEMENT; CONSISTENTLY STRIVES FOR EXCELLENCE IN ALL ASPECTS OF PATIENT CARE AND PROFESSIONAL ACTIVITIES; ACCEPTING CONSTRUCTIVE FEEDBACK IN A POSITIVE MANNER; TAKING ADVANTAGE OF LEARNING OPPORTUNITIES. ASK QUESTIONS AND REVIEWS PROTOCOLS.

APPEARANCE AND PERSONAL HYGIENE	1	2	3
--	----------	----------	----------

EXAMPLES, BUT ARE NOT LIMITED TO: HAVING APPROPRIATE CLOTHING AND UNIFORM THAT IS NEAT, CLEAN AND WELL MAINTAINED; NAME BADGE WORN, MAINTAINING GOOD PERSONAL HYGIENE AND GROOMING.

SELF-CONFIDENCE

1 2 3

EXAMPLES, BUT ARE NOT LIMITED TO: DEMONSTRATING THE ABILITY TO TRUST PERSONAL JUDGMENT; DEMONSTRATING AN AWARENESS OF STRENGTHS AND LIMITATIONS; EXERCISING GOOD PERSONAL JUDGMENT.

COMMUNICATIONS

1 2 3

EXAMPLES, BUT ARE NOT LIMITED TO: SPEAKING CLEARLY; WRITING LEGIBLY; ACTIVE LISTENING; ADJUSTING COMMUNICATION STRATEGIES TO VARIOUS SITUATIONS. PROPER COMMUNICATION WITH OTHER PUBLIC AND HEALTH CARE PERSONNEL.

TIME MANAGEMENT

1 2 3

EXAMPLES, BUT ARE NOT LIMITED TO: BEING CONFIDENT; PUNCTUAL; COMPLETING TASKS AND ASSIGNMENTS ON TIME.

TEAM WORK AND DIPLOMACY

1 2 3

EXAMPLES, BUT ARE NOT LIMITED TO: PLACING THE SUCCESS OF THE TEAM ABOVE SELF- INTEREST; NOT UNDERMINING THE TEAM; HELPING AND SUPPORTING OTHER TEAM MEMBERS; SHOWING RESPECT FOR ALL TEAM MEMBERS; REMAINING FLEXIBLE AND OPEN TO CHANGE; COMMUNICATING WITH OTHERS TO RESOLVE PROBLEMS.

RESPECT

1 2 3

EXAMPLES, BUT ARE NOT LIMITED TO: BEING POLITE TO OTHERS; NOT USING DEROGATORY OR DEMEANING TERMS; BEHAVING IN A MANNER THAT BRINGS CREDIT TO THE PROFESSION.

PATIENT ADVOCACY

1 2 3

EXAMPLES, BUT ARE NOT LIMITED TO: NOT ALLOWING PERSONAL BIAS OR FEELINGS TO INTERFERE WITH PATIENT CARE; PLACING THE NEEDS OF PATIENTS ABOVE SELF-INTEREST; PROTECTING AND RESPECTING PATIENT CONFIDENTIALITY AND DIGNITY.

CAREFUL DELIVERY OF SERVICE	1	2	3
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EXAMPLES, BUT ARE NOT LIMITED TO: MASTERING AND REFRESHING SKILLS; PERFORMING COMPLETE EQUIPMENT CHECKS; DEMONSTRATING CAREFUL AND SAFE PATIENT CARE OPERATIONS; FOLLOWING POLICIES, PROCEDURES, AND PROTOCOLS; FOLLOWING ORDERS.

Use the space below to explain any ratings below "competent". Identify specific behaviors, and corrective actions.

EXAMPLE

Preceptor Name _____ Signature _____



EMS PRECEPTOR AGREEMENT



PRECEPTOR ROLES AND RESPONSIBILITIES

- Have knowledge within the preceptor's field of practice
- Have knowledge of the student's scope of practice
- Have knowledge of each student's goals of his/her rotation
- Be present at all times during skill performance
- Identify learning experiences for students
- Explain clinical techniques as opportunities arise
- Allow student to assume Paramedic lead role in decision making
- Allow student to be accountable for his/her own actions or judgments
- Actively stimulate critical thinking by use of questions/answers
- Guide student to ASSESS the whole patient
- Provide pertinent feedback after each contact
- Identify the student's current placement in the clinical/field component
- Discuss relationship of EMS profession to medical direction
- Use non-patient care times for skills and demonstrations
- Use effective counseling techniques
- Support the program course content
- Maintain an environment free of harassment and discrimination
- Coach the student from observer to team leader
- Provide daily and individual EMS call feedback
- Promote teamwork
- Establish standard of care
- Confront issues immediately when they arise
- Promote confidence
- Empower the student
- Complete a summative evaluation
- Assist the student with documentation protocols
- Be a great role model!

Other Preceptor Characteristic Roles:

Good Communication skills
Establishes a climate conducive to learning
Shares practical steps in patient care
Is patient
Provides positive & correctional feedback
Listens to the student



STUDENT EVALUATION OF FIELD PRECEPTOR

(Completed in FISDAP)

PRECEPTOR NAME _____ SERVICE _____

Directions: In the box following each statement, circle your answer as to your opinion of the statement. Do not fill in your name or other identifying data. This will not be seen by your instructor until after final grades have been submitted. Please indicate your opinion using the following Liker Scale:

1	2	3	4	5
Strongly disagree	Disagree	Undecided	Agree	Strongly Agree

ROLE MODELING

The Preceptor:

1. Is an effective role model of skills, attitude, and value	1	2	3	4	5
2. Is knowledgeable about current principles of patient care	1	2	3	4	5
3. acknowledges own limitations	1		3	4	5
4. Assists the student in applying principles and theories		2	3	4	5
5. Demonstrates an interest in students	1	2	3	4	5
6. Is receptive to student's ideas and experiences	1	2	3	4	5

ORGANIZATION

The Preceptor:

7. Provides for student orientation to clinical areas	1	2	3	4	5
8. Serves as a resource to student	1	2	3	4	5
9. Oversees and helps in new learning experiences	1	2	3	4	5
10. Correlates clinical experiences to classroom theory	1	2	3	4	5
11. Uses clinical experiences to enhance transfer of Theory to practice	1	2	3	4	5
12. Has realistic and clear expectations of students	1	2	3	4	5
13. Individualizes learning experiences to the needs of the student	1	2	3	4	5

See reverse side

FEEDBACK

The Preceptor:

- | | | | | | | |
|-----|--|---|---|---|---|---|
| 14. | Is objective and fair in evaluation | 1 | 2 | 3 | 4 | 5 |
| 15. | Communicates with the students regarding progress, verbally and in writing, in a timely manner | 1 | 2 | 3 | 4 | 5 |
| 16. | Uses both positive and constructive feedback | 1 | 2 | 3 | 4 | 5 |
| 17. | Does not intimidate or chastise the student after making a mistake | 1 | 2 | 3 | 4 | 5 |

18. Would you recommend this preceptor to other students and why?

Thank you!

TERMINAL COMPETENCIES

Terminal competencies must be completed for successful completion of the Paramedic program.

Paramedic Terminal Competencies Evaluation

"Description of the Profession" from the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions"

In order to be recommended for certification, a graduate of the Kiamichi Tech Paramedic Program must meet the following Paramedic Professional requirements (or terminal objectives/competencies).

OBJECTIVE

Administer *basic* emergency skills including, but not limited to: splinting, bandaging, hemorrhage control, and cold applications.

METHODS:

- ☐ Receive a National Registry of EMTs certification prior to enrolling in Paramedic class;
- ☐ Pass all basic skills competencies;
- ☐ Must maintain certification in basic life support for healthcare providers

PREPARATORY OBJECTIVES

The Paramedic will understand the roles and responsibilities of a Paramedic within an EMS system, apply the basic concepts of development, pathophysiology and pharmacology to assessment and management of emergency patients, be able to properly administer medications, start and maintain intravenous therapy, and communicate effectively with patients.

METHODS:

- Pass all theory exams with an 80% average or higher;
- Pass all skill competencies including: IV therapy, medication administrations; (i.e.: IM, IV, SQ, SL, IO, inhalation, intranasal, etc.)
- Conduct a minimum of 25 (20 ALS and 5 BLS) Capstone Leadership ALS rides and 30 (20 ALS and 10 BLS) ALS field internship rides with an approved EMS Preceptor;
- Score a minimum of 9 points on the Daily Professional Behavior.
- Safely administer parenteral medications to a minimum of 20 patients, 2 IM/SQ, 2 inhaled;
- Safely demonstrate venous access in all age groups to a minimum of 25 patients; including 5 pediatrics and 2 IOs;
- Safely administer 2 IV infusion medications.
- Pass a final practical scenario examination.

AIRWAY OBJECTIVES

The Paramedic student will be able to establish and/or maintain a patent airway, oxygenate, and ventilate a patient.

METHODS:

- Pass all theory examinations with an average of 80% or higher;
- Pass all skill competencies including: i.e.: OPA, NPA, suctioning, BVM, mask ventilation, Supraglottic airway, ETT (adult & pediatrics), respiratory medication administration, chest decompression, cricothyrotomy, RSI (see skills packet), etc.;
- Pass program's Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS) courses
- Safely demonstrate endotracheal intubations on a minimum of 10 patients;
- Safely demonstrate airway management, including suctioning 2 endotracheal patients.

- Safely perform cricothyrotomies on 2 patients.
- Safely perform a supraglottic airway on 10 patients.
- Safely demonstrate FBAO removal with Magill forceps on 2 patients.
- Safely demonstrate needle decompressions on 2 patients.
- Safely ventilate unintubated patients of all age groups a minimum of 10 times;
- Safely perform a comprehensive treatment plan for a minimum of 16 adult patients with dyspnea/respiratory distress;
- Safely perform a comprehensive treatment plan for a minimum of 2 pediatric and 2 geriatric patients with dyspnea/respiratory distress;
- Pass the final practical scenario exam.

ASSESSMENT OBJECTIVES

The Paramedic student will be able to take a proper history and perform a comprehensive physical exam on any patient, and communicate the findings to others.

METHODS:

- Pass all theory exams with an 80% average or higher;
- Pass all the patient assessment skills competencies;
- Complete one clinical rotation with approved Medical Director;
- Safely perform a comprehensive assessment on 30 pediatric patients (minimum of 2 in each age group: newborn, infant, toddler, preschool, school-age, adolescent);
- Safely perform a comprehensive assessment on 60 adult patients;
- Safely perform a comprehensive assessment on 30 geriatric patients 65 or older;
- Safely perform a comprehensive assessment on 10 obstetrics patients (2 normal delivery with newborn care, 2 complicated delivery and 4 distressed neonate).
- Safely perform a comprehensive assessment on 40 trauma patients, (6 pediatric and 6 geriatric);
- Score a minimum of 9 on professional behavior.
- Must pass a final practical scenario exam.

TRAUMA OBJECTIVES

The Paramedic student will be able to integrate pathophysiological principles and assessment findings to formulate a field impression and implement the treatment plan for the trauma patient.

METHODS:

- Pass all theory exams with a minimum of 80% average or higher;
- Pass all the patient assessment skills competencies;
- Safely perform a comprehensive assessment on a minimum of 40 trauma patients (6 pediatric, 6 geriatric patients);
- Must pass a final practical scenario exam.

MEDICAL OBJECTIVES

The Paramedic student will be able to integrate pathophysiological principles and assessment findings to formulate a field impression and implement the treatment plan for the medical patient.

METHODS:

- Pass all theory exams with a minimum of 80% average or higher;
- Pass the patient assessment skills competencies;
- Pass the programs AHA Advance Cardiac Life Support (ACLS) course;
- Perform a comprehensive assessment on a minimum of 18 psychiatric patients;
- Perform a comprehensive assessment on a minimum of 20 neurological patients (e.g. TIA, stroke, syncope, AMS)

- Perform a comprehensive assessment on a minimum of 20 adult dyspnea/respiratory distress patients (18 adult; 2 pediatrics; 2 geriatrics)
- Perform a comprehensive assessment on a minimum of 30 other medical complaints (e.g. abdominal pain, OD, endocrine, reproductive, gynecological, sepsis, etc.)
- Perform a comprehensive assessment on a minimum of 2 patients receiving dialysis;
- Must pass a final practical scenario exam.

CARDIOVASCULAR OBJECTIVES

- Pass all theory exams with an 80% average or higher;
- Pass all cardiac assessment skills competencies;
- Perform a comprehensive assessment on a minimum of 20 chest pain/ACS patients;
- Perform a comprehensive assessment on a minimum of 3 cardiac arrest patients (2 formative and 1 summative).
- Recognize and treat a minimum of 16 cardiac dysrhythmia patients (10 formative and 6 summative).
- Perform synchronized cardioversion on 2 patients.
- Perform defibrillation on 2 patients.
- Perform transcutaneous pacing on 2 patients.
- Perform chest compressions on 2 patients.
- Complete the basic and advanced 12-lead course;
- Successfully complete 2 cardiac patient team leads in Capstone clinical rotations;
- Must pass Kiamichi Tech's ACLS/PALS class and the final practical scenario exam.

SPECIAL POPULATION OBJECTIVES

The Paramedic student will be able to integrate pathophysiological principles and assessment findings to formulate a field impression and implement the treatment plan for the neonatal, pediatric, and geriatric patients, diverse patients, and chronically ill patients.

METHODS:

- Pass all theory exams with a minimum of 80% average or higher;
- Pass all skills competencies;
- Pass the program's AHA Pediatric Advanced Life Support (PALS) course;
- Perform an intravenous therapy on a minimum of 5 pediatric patients;
- Safely perform a comprehensive assessment on 30 pediatric patients;
- Safely perform a comprehensive assessment on 30 geriatric patients 65 or older;
- Pass a final practical scenario examination.
- Safely perform a comprehensive assessment on 10 OB patients.
- Safely perform a comprehensive assessment on 4 distressed neonate patients.

AMBULANCE OP OBJECTIVES

- Pass all theory exams with an 80% average or higher;
- Pass all triage scenarios

FIELD INTERSHIP OBJECTIVES

- Conduct 120 hours of field internship with an approved EMS preceptor;
- Successfully perform as an EMT progressing into an entry level paramedic on **30** ALS internship runs (20 ALS and 10 BLS) to obtain an attestation from the preceptor to begin Capstone leadership.

CAPSTONE OBJECTIVES

- Conduct 100 hours of Capstone leadership with an approved preceptor;
- Successfully perform as an entry level paramedic on 25 ALS runs (20 ALS and 5 BLS) with a minimum of 2 cardiac, 2 trauma, 2 medical, 1 geriatric and 1 pediatric patients.

Clinical Affective Evaluation (Completed in FISDAP)

Student: _____

Date: _____

Clinical Location: _____

Preceptor: _____

Surgery: ☐

L&D: ☐

IV/Lab ☐

E.D.: ☐

ICU/CCU ☐

Dialysis: ☐

	Superior	Above Average	Average	Needs Improvement	Poor
1. APPEARANCE: Neat, clean and appropriately dressed with picture ID	5	4	3	2	1
2. ATTENDANCE: Punctual; proper notification made for absence & tardy	5		3	2	1
3. ATTITUDE/RESOURCEFULNESS:					
a. Willing and eager to learn and participate in phases of health care delivery and job responsibilities	5	4	3	2	1
b. Looks for learning experiences, uses resources efficiently, asks appropriate questions	5	4	3	2	1
4. ORGANIZATION: Able to use systematic approach to patient, assessment, evaluation and treatment	5	4	3	2	1
5. PATIENT ASSESSMENT: Able to perform thorough patient assessment and use clinical findings to recognize specific medical conditions	5	4	3	2	1
6. DEFINITIVE CARE: Able to choose and accurately deliver appropriate therapeutic modalities for specific medical conditions	5	4	3	2	1
7. OVERALL SKILL PERFORMANCE: Demonstrates proper technique, accuracy, care of equipment, and application of theoretical concepts	5	4	3	2	1

	Superior	Above Average	Average	Needs Improvement	Poor
8. PROFESSIONAL DEVELOPMENT:					
a. Establishes rapport with patient and patient's family; demonstrates sensitivity to their verbal and non- verbal responses	5	4	3	2	1
b. Explains procedures in a comprehensible and reassuring manner	5	4	3	2	1
c. Works well with others as part of the health care team	5	4	3	2	1
d. Uses discretion in discussion of personal matters involving affiliate personnel, patients, visitors, and other students.	5	4	3	2	1
e. Reacts appropriately to various situations demonstrating composure, patience, and use of appropriate comments	5	4	3	2	1
f. Demonstrates flexibility: (i.e. change of assignment, new situations, interruptions, etc.)	5	4	3	2	1
g. Aware of role as a student including limitations and expectations; acceptance of constructive criticism; utilizes suggestions for improvement; asks for advice or assistance if unsure	5	4	3	2	1
Comments: (general, strengths, needs for improvement, etc.)					
Preceptor--Please Print			Preceptor Signature		

LABORATORY LEARNING OBJECTIVES

The student will spend 8 hours of clinical time with an IV Therapy Team (LAB) under the supervision of a phlebotomist or IV lab nurse. If the clinical facility does not have an appropriate IV Therapy Team, the student may complete this clinical in the Emergency Department after approval from the clinical coordinator or instructor.

1. Attend all scheduled clinical shifts on time, in proper attire, and neat in appearance.
2. Report to the department shift supervisor or phlebotomist at the beginning of each scheduled clinical.
3. Initiate IV Therapy, to include preparation and maintenance.
4. Draw venous blood samples.
5. Maintain all universal precautions during patient care procedures.
6. Use aseptic techniques while performing venipunctures.
7. Work toward successful completion of 15 adult venipunctures and 5 pediatric venipunctures. (You most likely will not obtain all of these in one 8-hour lab rotation.)
8. Complete the following documentation at the end of each shift:
 - Document all procedures in FISDAP Skills Tracker.
 - Instruct preceptor to evaluate your performance using the FISDAP evaluations (KT Facility Evaluation of the Student and Professional Behavior Evaluation).
 - Complete the student evaluation of the preceptor (Preceptor Evaluation).
 - Complete the facility evaluation (Site Evaluation).
 - Complete the daily clinical log (time sheet) in the Lab Clinical Packet.

Upon completion of the required hours for this clinical rotation, make a photocopy of your packet and submit to the Kiamichi Tech Clinical Coord. Keep the original for your records. **DO NOT SCAN AND EMAIL YOUR ORIGINAL CLINICAL PACKET. PLEASE SCAN AND EMAIL THE PHOTOCOPY OF YOUR PACKET INSTEAD.**

OPERATING ROOM LEARNING OBJECTIVES

The student will spend a minimum of 16 hours of Clinical time in the operating room working under the direct supervision of a Nurse Anesthetist or Doctor of Anesthesiology. In order to complete this clinical rotation, the student will observe and assist with procedures as permitted by the staff.

1. Attend all scheduled clinical shifts on time, in proper attire.
2. Report to surgery charge nurse and chief anesthetist.
3. Perform maintenance of patient airway with the use of airway adjuncts (LMAs, OPAs, etc.), suctioning, positioning, with special attention to ventilation equipment.
4. Perform oxygen maintenance and various administration techniques.
5. Perform basic and advanced airway management, including tracheal intubations, as permitted by staff.
6. Assist with IV therapy and maintenance.
7. Use all universal precautions during **ALL** patient contact.
8. Discuss with the surgery staff:
 - a. Special airway management and complication procedures you may encounter in the field.
 - b. Signs and symptoms of IV therapy complications and their remedies.
9. At the end of the shift, the student must have his or her daily evaluation form (in FIDAP) signed and dated by the preceptor.
10. Assist and perform the above-mentioned therapies only with the preceptor's permission.
11. Work toward successful completion of 5 ET-endotracheal intubations, 5 BVM of non-intubated patients, Oxygen administration (may be completed in all clinical areas, not just surgery).
12. Complete the following documentation at the end of each shift:
 - Document all procedures in FIDAP Skills Tracker.
 - Instruct preceptor to evaluate your performance using the FIDAP evaluations (KT Facility Evaluation of the Student and Professional Behavior Evaluation).
 - Complete the student evaluation of the preceptor (Preceptor Evaluation).
 - Complete the facility evaluation (Site Evaluation).
 - Complete the daily clinical log (time sheet) in the OR Clinical Packet.

Upon completion of the required hours for this clinical rotation, make a photocopy of your packet and submit to the Kiamichi Tech Clinical Coord. Keep the original for your records. **DO NOT SCAN AND EMAIL YOUR ORIGINAL CLINICAL PACKET. PLEASE SCAN AND EMAIL THE PHOTOCOPY OF YOUR PACKET INSTEAD.**

INTENSIVE CARE UNIT LEARNING OBJECTIVES

The student will spend 32 hours of clinical time working under the direct supervision of nurses and physicians in the ICU/CCU. In order to complete this clinical rotation, the student will observe and assist, if permitted, with the following guidelines/objectives.

1. Attend all scheduled clinical shifts on time, in proper attire (with name tags).
2. Report to the department shift supervisor at the beginning of each clinical and participate in the change of shift reporting with the ICU/CCU nurses.
3. Maintenance of patient airways with the use of airway adjuncts, suctioning and positioning, with special attention to understanding ventilating respirators.
4. Patient assessment and shock management.
5. Assist and perform oxygen maintenance and administration of various techniques.
6. Perform IV therapies and maintenance.
7. Oral and written reports.
8. Familiarize self with ICU/CCU department layout, location of supplies, and policies and personnel.
9. Participate (if allowed) and observe Code Blue procedures.
10. Assist or observe the initiation and maintenance of Foley catheters.
11. Assist or observe the initiation of special procedures, such as pacemaker placement, central lines, etc., as allowed by preceptors.
12. Record and interpret ECG rhythm strips.
13. Assist or observe with the preparation and administration of IM, IV, SQ, SL, and transtracheal medications.
14. Assist or observe the initiation and maintenance of NG/OG tubes and stoma care.
15. Discuss with the nursing staff and physicians each of the following:
 - Patient assessment techniques, including procedures for respiratory and neurological status checks and special procedures for bedridden patients.
 - Emergency crash cart location, equipment and meds.
 - Review of ECG's and their appropriate treatments.
16. Assist with performing the above-mentioned therapies only with permission of the Preceptor.
17. Complete the following documentation for ICU/CCU clinical rotations:
 - Document all procedures in FIDAP Skills Tracker.
 - Instruct preceptor to evaluate your performance using the FIDAP evaluations (KT Facility Evaluation of the Student and Professional Behavior Evaluation).
 - Complete the student evaluation of the preceptor (Preceptor Evaluation).
 - Complete the facility evaluation (Site Evaluation).
 - Complete the daily clinical log (time sheet) in the ICU Clinical Packet.
 - Complete two ECG strip summaries per 8-hour shift
 - Complete two pathophysiology sheets per 8-hour shift.

Upon completion of the required hours for this clinical rotation, make a photocopy of your packet and submit to the Kiamichi Tech Clinical Coord. Keep the original for your records. **DO NOT SCAN AND EMAIL YOUR ORIGINAL**

CLINICAL PACKET. PLEASE SCAN AND EMAIL THE PHOTOCOPY OF YOUR PACKET INSTEAD.

ER DEPARTMENT LEARNING OBJECTIVES

The student will spend 100 hours of clinical time in the Emergency Department working under the direct supervision of nurses and physicians. In order to complete this clinical rotation, the student must be directly supervised by a licensed physician in the emergency room setting. The student must be with the physician a minimum of 60 hours. The remaining 40 hours can be completed with the emergency room nurse. The 60 hours daily performance sheet **MUST** be signed by a physician only. The student will:

1. Attend all scheduled clinical shifts on time, in proper attire and neat in appearance.
2. Report to the department shift supervisor (or ER Physician) at the beginning of each scheduled clinical.
3. Perform patient assessment including auscultation, palpation, inspection and percussion when indicated.
4. Maintain airways with proper positioning, use of airway adjuncts, and suctioning.
5. Administer oxygen using available and appropriate airway adjuncts.
6. Discuss the ED triage policy and understand its theory.
7. Participate in the use of oxygen regulators, flow meters, and nebulizers.
8. Assist with shock management.
9. Monitor patients with suspected neurological injuries.
10. Assist with IV therapy, both observe and perform IV cannulation.
11. Draw venous blood samples.
12. Assist with oral and written patient reporting.
13. Perform CPR and other procedures related to Code Blues.
14. Familiarize self with the ED layout, location of supplies, and policies and procedures.
15. Observe and assist with the following: IV's through central routes, chest compressions, and cricothyrotomy.
16. Record and interpret ECG's, including 12-lead ECG's.
17. Assist with the preparation and/or administration of IM, IV, SQ, SL, and transtracheal medications.
18. Observe and insert NG tubes and Foley catheters.
19. The following documentations must be completed for your ED rotations:
 - Document all procedures in FISDAP Skills Tracker.
 - Instruct preceptor to evaluate your performance using the FISDAP evaluations (KT Facility Evaluation of the Student and Professional Behavior Evaluation).
 - Complete the student evaluation of the preceptor (Preceptor Evaluation).
 - Complete the facility evaluation (Site Evaluation).
 - Complete the daily clinical log (time sheet) in the ER Clinical Packet.
 - Complete two ECG summary sheets per 8-hour shift
 - Complete two pathophysiology sheets per 8-hour shift.

Upon completion of the required hours for this clinical rotation, make a photocopy of your packet and submit to the Kiamichi Tech Clinical Coord. Keep the original for your records. **DO NOT SCAN AND EMAIL YOUR ORIGINAL CLINICAL PACKET. PLEASE SCAN AND EMAIL THE PHOTOCOPY OF YOUR PACKET INSTEAD.**

DIALYSIS LEARNING OBJECTIVES

The student will spend eight (8) hours of clinical time in a Dialysis Treatment Setting working under a Certified Dialysis Technician/Nurse. In order to complete this clinical rotation, the student will observe and assist with procedures as permitted by the staff.

- Attend all scheduled clinical shifts on time, in proper attire, and neat in appearance.
- Report to the Dialysis Technician/Nurse in charge at the beginning of the shift.
- Note common causes of renal failure and disease.
- Perform patient assessment and history gathering.
- Assist facility staff with duties as assigned.
- Observe dialysis treatments and processes.
- Discuss EMS implications of taking care of a dialysis patient with staff.
- Discuss, observe and assist with vascular access via different methods.
- Only perform procedures indicated and allowed by the preceptor.
- Work toward competency goals:
 - Two (2) dialysis patient contacts.
 - Include their history in the FISDAP report:
 - What caused their renal failure?
 - What is their treatment plan?
 - What type of vascular access do they have in place?
 - What is their long-term outlook?

Complete the following at the end of the shift:

- Document all procedures in FISDAP Skills Tracker.
- Instruct preceptor to evaluate your performance using the FISDAP evaluations (KT Facility Evaluation of the Student and Professional Behavior Evaluation).
- Complete the student evaluation of the preceptor (Preceptor Evaluation).
- Complete the facility evaluation (Site Evaluation).
- Complete the daily clinical log (time sheet) in the Dialysis Clinical Packet.

Upon completion of the required hours for this clinical rotation, make a photocopy of your packet and submit to the Kiamichi Tech Clinical Coord. Keep the original for your records. **DO NOT SCAN AND EMAIL YOUR ORIGINAL CLINICAL PACKET. PLEASE SCAN AND EMAIL THE PHOTOCOPY OF YOUR PACKET INSTEAD.**

PSYCHIATRIC LEARNING OBJECTIVES

The student will spend 8 hours of clinical time under the direct supervision of nurses and physicians in the clinical site. In order to complete this clinical rotation, the student will observe and assist, if permitted, with the following guidelines/objectives.

- Attend your scheduled clinical shift on time, neat in appearance, in business casual attire. **DO NOT WEAR YOUR EMS UNIFORM TO THIS ROTATION**. Make sure you do have your student photo ID badge on you when you arrive at the clinical site.
- Report to the Technician/Nurse in charge upon arrival.
- Assist with the assessment and management of psychiatric or emotionally disturbed patients, as permitted by the staff.
- Perform patient assessment and history gathering.
- Assist facility staff with duties as assigned.
- Assist with the management and assessment of patients with alcoholism and/or drug abuse, as permitted by staff.
- Only perform procedures indicated and allowed by the preceptor.
- Work towards competency goals:
 - No less than five (5) psychiatric patient contacts. Narratives should reflect:
 - Diagnosis
 - Treatment Plan
 - Medical Treatments
 - Non-medication Treatments
 - Prognosis
 - Psycho-Social History

Complete the following documentation for Behavioral clinical rotations:

- Document all procedures in FIDAP Skills Tracker.
- Instruct preceptor to evaluate your performance using the FIDAP evaluations (KT Facility Evaluation of the Student and Professional Behavior Evaluation).
- Complete the student evaluation of the preceptor (Preceptor Evaluation).
- Complete the facility evaluation (Site Evaluation).
- Complete the daily clinical log (time sheet) in the PSYCHIATRIC Clinical Packet.

Upon completion of the required hours for this clinical rotation, make a photocopy of your packet and submit to the Kiamichi Tech Clinical Coord. Keep the original for your records. **DO NOT SCAN AND EMAIL YOUR ORIGINAL CLINICAL PACKET. PLEASE SCAN AND EMAIL THE PHOTOCOPY OF YOUR PACKET INSTEAD.**

EMS FIELD INTERNSHIP

- A. The paramedic student is required to complete a minimum of 220 hours in the EMS field. These hours are divided into the EMS Field Internship and the CAPSTONE phases. The field hours will consist of a minimum of 120 hours.
- B. The CAPSTONE packet is provided to the students ***after*** successfully completing all phases of his/her education and will be a minimum of 100 hours. All knowledge, skills, hospital, and 100 hours of field rotations must be successfully completed ***prior*** to receiving the CAPSTONE clinical packet. Plus, the approved preceptor must attest to the fact the student is ready for his/her CAPSTONE phase of leadership rides. The *Preceptor Attestation Letter* is uploaded on the FISDAP Dashboard.
- C. Preceptors must be approved by the KIAMICHI TECH EMS Clinical Coordinator prior to conducting Field/CAPSTONE rotations. The preceptors must have two or more years of street experience with advanced life support protocols.
- D. Students cannot perform clinical rotations where s/he is employed, or with friends or family.
- E. Students must have their current NREMT and state EMT certification, and a current Health Care Provider (BLS) card.
- F. Students must wear a safety vest during any unsafe scene that requires high visibility of the medics.
- G. Students cannot be in the front of the ambulance, and must wear his/her seatbelt at ***all times***, unless patient care dictates otherwise.
- H. Remember, students will be graded on his/her clinical performance, documentation and affective behavior.
- I. Students must be in proper uniform, with name badge and clinical packet in hand or they will be denied access to the rotation for that day.

Upon completion of the required hours for this clinical rotation, make a photocopy of your packet and submit to the Kiamichi Tech Clinical Coord. Keep the original for your records. **DO NOT SCAN AND EMAIL YOUR ORIGINAL CLINICAL PACKET. PLEASE SCAN AND EMAIL THE PHOTOCOPY OF YOUR PACKET INSTEAD.**

FIELD LEARNING OBJECTIVES

- Students must schedule a rotation through the required calendar setup, and report early to the assigned preceptor for that shift.
- Students will help the crew members with all general activities such as equipment and ambulance inspection, cleaning and maintenance.
- Students will read and understand the rationale of the service's protocols prior to the first shift.
- Students will participate/observe all ambulance calls, transfers and emergencies.
- Perform patient assessment including medical history and conducting a physical examination. Minimum assessment skills should include taking and recording vital signs and lung auscultation.
- Assist and review basic and advanced treatment of trauma and medical emergencies.
- Assist in scene control and triaging.
- Assist and observe with obtaining medical control communication.
- Assist and observe in the transfer of patient's after care.
- Continue to track the numbers of all patient contacts, such as skills and procedures, age, sex and chief complaints throughout all the rotations.

DOCUMENTATION REQUIREMENTS

- **Daily Performance:** Complete documents and evaluations in FISDAP:
 - FISDAP – Student Self Evaluation
 - FISDAP – Preceptor Evaluation of the Student
 - FISDAP – Preceptor Evaluation (student evaluates the preceptor)
 - FISDAP – Professional Behavior Evaluation (preceptor evaluations student)
 - FISDAP – Site Evaluation (student evaluates clinical site/agency)
- **Pathophysiology:** Complete a minimum of 12 pathophysiology reports **on patients encountered during the field rotation.** The reports will be grammatically correct, readable, and a minimum of 200 words.
- **ECG:** Complete a minimum of 12 ECG interpretations on patients **encountered during the field rotations.** (6 Lead II strips and 6 12-lead strips)
- **Radio Report:** Complete a minimum of 12 radio reports during the field rotation.
- **PCR:** Complete a minimum of 30 patient care report narratives. Students should have them critiqued by the preceptor.
- **Competencies:** Document all required competencies located in FISDAP. (*refer to the Graduation Requirement Report in FISDAP*)

LABOR & DELIVERY LEARNING OBJECTIVES

The student will spend 16 hours in a Labor & Delivery (L&D) Unit in order to complete this clinical rotation. The student will observe and assist with procedures as permitted by the L&D staff.

- Attend all scheduled clinical shifts on time, in proper attire and neat in appearance.
- Report to the L&D Unit Supervisor or Charge Nurse upon arrival.
- Perform patient assessment and history gathering.
- Assist facility staff with duties as assigned.
- Discuss EMS implications of taking care of an obstetric/neonatal patient with facility staff.
- Discuss, observe and assist with vascular access via different methods.
- Only perform procedures indicated and allowed by the preceptor.
- Work towards competency goals:
 - Perform assessments of patients in labor.
 - Perform assessments of pediatric patients.
 - Observe and assist with deliveries.
 - Assist with oral and written patient reporting.
 - Assist and observe the administration of medication in the pre-delivery and post-delivery patient.
 - Complete obstetric patient contacts (log in FIDAP as an impression of OB.)

Complete the following documentations during OB-GYN clinical rotations:

- Document all procedures in FIDAP Skills Tracker.
- Instruct preceptor to evaluate your performance using the FIDAP evaluations (KT Facility Evaluation of the Student and Professional Behavior Evaluation).
- Complete the student evaluation of the preceptor (Preceptor Evaluation).
- Complete the facility evaluation (Site Evaluation).
- Complete the daily clinical log (time sheet) in the OB Clinical Packet.

Upon completion of the required hours for this clinical rotation, make a photocopy of your packet and submit to the Kiamichi Tech Clinical Coord. Keep the original for your records. **DO NOT SCAN AND EMAIL YOUR ORIGINAL CLINICAL PACKET. PLEASE SCAN AND EMAIL THE PHOTOCOPY OF YOUR PACKET INSTEAD.**

PEDIATRIC LEARNING OBJECTIVES

The student will spend 32 hours of clinical time in a Pediatric Clinic or Unit at a hospital in order to complete this clinical rotation. The student will observe and assist with procedures as permitted by the facility staff. The student will:

- Attend all scheduled clinical shifts on time, in proper uniform with student photo ID badge, maintaining a professional appearance.
- Perform pediatric patient assessments, including developing pertinent medical history and performing a physical examination.
- Maintain a patent airway in pediatric patients with varying levels of consciousness; including proper positioning, use of airway adjuncts and suctioning.
- Administer oxygen using available adjunct equipment, such as mask, cannulas or nebulizers.
- Assist with blood draws or IV therapy.
- Assist with the preparation and administration of IM, IV, SO, SL, rectal or trans-tracheal medications.
- Assist with oral and writing reporting.
- Provide comfort, reassurance and emotional support to patients and family members.
- Discuss with the preceptor each of the following:
 - Pediatric Assessment Techniques
 - Special Consideration (behavioral, emotional or physical) for each of the following age groups:
 - Assessment of Newborn (0-1 month)
 - Assessment of Infant (1 month to 1 year)
 - Assessment of Toddler (1 year to 3 years)
 - Assessment of Preschooler (3 years to 5 years)
 - Assessment of School Ages (6 years to 12 years)
 - Assessment of Adolescents (13+ years)
 - Pediatric respiratory management – review anatomical airway differences from adults, IPPV techniques and precautions, ET intubations and management of each of the following:
 - Asthma
 - Bronchiolitis
 - Croup
 - Epiglottitis
 - Vital Signs – review normal ranges from children of various sizes, weights and ages.
 - Pediatric Cardiac Arrest – review CPR procedures and protocols for intubation, fluids, drugs and defibrillation.
 - Fever in Children
 - Pediatric Blood Draws and IV/Fluid Therapy – review insertion sites, needles/catheters, administration sets, fluids of choice and infusion rates.
 - Pediatric Medical Administration – review indications, dosages and effects for the following”

▪ Sodium Bicarb	Furosemide
▪ Epinephrine 1:1,000	Diphenhydramine
▪ Epinephrine 1:10,000	Isoproterenol
▪ Atropine	Dopamine
▪ Lidocaine	Diazepam
▪ Calcium	Lorazepam
▪ Naloxone	Midazolam
▪ Amiodarone	Albuterol
▪ Dextrose	
 - Neonatal Transport – review transfer protocols, if available, and the preparation and operations of transport equipment.

- Assist the staff with the management of pediatric patients and equipment at their request and discretion by cooperating, following their instructions, and using tact and being courteous in interactions with patients, family members and all facility staff.

Complete during your rotation the following paperwork:

- Document all procedures in FISDAP Skills Tracker.
- Instruct preceptor to evaluate your performance using the FISDAP evaluations (KT Facility Evaluation of the Student and Professional Behavior Evaluation).
- Complete the student evaluation of the preceptor (Preceptor Evaluation).
- Complete the facility evaluation (Site Evaluation).
- Complete the daily clinical log (time sheet) in the OB Clinical Packet.

Documentation requirement for this clinical rotation once all required hours are completed includes:

- Complete four (4) pathophysiology sheets (**Pediatric-related illnesses**)

MEDICAL DIRECTOR LEARNING OBJECTIVES

The student will spend eight (8) hours of clinical time with the Kiamichi Tech EMS Program Medical Director or a KT approved Associate Medical Director to establish a baseline of competence as an **entry-level** Paramedic. In order to complete this clinical rotation, the student will observe and assist with procedures as permitted by the Medical Director, answer questions, and interview as deemed necessary by the Medical Director.

- Attend scheduled clinical shift on time, in proper attire, and neat in appearance.
- Report directly to the Medical Director upon arrival.
- Perform patient assessment and history gathering.
- Assist facility staff with duties as assigned.
- Discuss EMS implications of taking care of various patients.
- Only perform procedures indicated and allowed by the Medical Director.
- Work toward competency goals:
 - Two (2) patient contacts.
 - Include patient history in the FISDAP narrative.

Complete the following at the end of the shift:

- Document all procedures in FISDAP Skills Tracker.
- Instruct preceptor to evaluate your performance using the FISDAP evaluations (KT Facility Evaluation of the Student and Professional Behavior Evaluation).
- Complete the student evaluation of the preceptor (Preceptor Evaluation).
- Complete the facility evaluation (Site Evaluation).
- Complete the daily clinical log (time sheet) in the Dialysis Clinical Packet.



FIELD INTERNSHIP VS CAPSTONE PHASE

FIELD INTERNSHIP

- Minimum 120 hours
- These are “*Third-Ride*” shifts, meaning the student will help the crew members with all general activities:
 - Equipment and Ambulance Inspection
 - Cleaning and Maintenance
 - Reading and Understanding Agency Protocols
 - Perform Patient Assessment
 - Perform Minimum Assessment Skills (vital signs, lung auscultation)
 - Assist in Scene Control and Triage
 - Observe and Obtain Medical Control Communication

CAPSTONE

- Minimum 100 hours
- Student must have completed ALL previous clinical rotations and successfully passed all the modules within the paramedic class
- Student must provide a signed Attestation Letter from EMS Preceptors and EMS Director indicating student is ready for his/her CAPSTONE
- Student must successfully serve as **Team Leader** in **30** team lead rides, with minimal prompting including:
 - 2 Cardiovascular Patients
 - 2 Trauma Patients
 - 2 Medical Emergencies
 - 1 Geriatric Patient
 - 1 Pediatric Patient

Please refer to Paramedic Handbook pages 39-42 for more detailed info.



EMS PRECEPTOR ATTESTATION STATEMENT

I, (please print) _____ have been serving as the approved
Field preceptor for the Paramedic student listed below:

(Paramedic student name)

I feel that this student is ready at this time to begin his/her Capstone without any further
teaching or prompting. I also understand the purpose, definitions and requirements of a
successful Capstone evaluation.

EMS Field Preceptor Signature

EMS Agency Director Signature

Date

Date

Please return to:
Michael Highfill, Clinical Coordinator
mhighfill@ktc.edu
Kiamichi Tech EMS
P. O. Box 825
Poteau, OK 74953
918-647-4525 ext 237
918-413-4131 cell



PARAMEDIC CLINICAL HANDBOOK STATEMENT OF UNDERSTANDING/CONTRACT

I, (print) _____ have received the Paramedic Clinical Handbook from my EMT Paramedic Instructor/Clinical Coordinator and have reviewed them with him/her.

- I understand that any clinical forms that are not neat and do have discrepancies pertaining to any of their documentation, especially times, dates and signatures, will not be accepted. If the rotation/shift is not accepted, the student must perform those hours gain within a designated time frame.
- I understand the attendance policy and if I do not complete 12 hours per week once approved for clinical rotations, then I can be dismissed from the program.
- I understand the clinical grading policy and agree to abide by it.
- I also understand any problems or inappropriate occurrences in the clinical rotation sites must be reported to the instructor immediately. Unprofessional behavior or violation of these rules may be cause for termination from the program.

I agree to abide by the rules and regulations for clinical rotations, as well as the rules and regulations of the individual's clinical facilities/agencies.

Student's Signature

Date

Witness' Signature

Date

Instructor's Signature

Date