

EMT

CLINICAL EXPERIENCE MANUAL

HOSPITAL/HEALTH FACILITY AND FIELD ROTATION

GOALS AND OBJECTIVES

I. DEFINITIONS

- Clinical rotation – The overall hands-on experience in a health care facility and/or the field setting. This rotation allows the EMT student to relate to real-world experiences described in textbooks and the classroom.
- Health facilities – Includes various medical units in acute care hospitals, emergency departments, clinics, urgent care centers, convalescent hospitals, skilled nursing facilities, adult day care, etc.
- Field rotation – Public and private ambulance providers that respond to 9-1-1 calls and provide emergency or interfacility transportation. This rotation allows the student to experience what it is like to be a member of an ambulance crew.

II. CLINICAL GOALS

The goal of the clinical experience in a licensed healthcare facility or on a Los Angeles County licensed ambulance is to observe and participate in as many EMS related activities that may be available. This is the time to refine assessment and technical skills, develop professional relationships with healthcare colleagues, enlist constructive critiques, develop critical thinking skills, and actively seek out learning experiences. Accomplishing clinical objectives will lead to achieving clinical goals.

- To provide the student with a comprehensive clinical experience to perform and further develop assessment and treatment skills learned during the didactic and practical phase of training.
- To introduce the student to various disciplines in healthcare and develop an understanding how these disciplines relate to patient care.
- To enable the student to build working relationships with other healthcare professionals.
- To expose the student to the various aspects of the Emergency Medical System (EMS).

III. REQUIREMENTS

The following requirements are set forth by state and county regulations as well as individual EMT training programs and must be adhered to for patient and student safety. Any violation of these requirements is subject to disciplinary measures which may include dismissal from the training program.

- An EMT student is eligible for clinical when the student has successfully completed an approved CPR program, assessment, vital signs, workforce safety and wellness lectures, accompanied skills instruction, and any additional training program requirements.
- All applicable healthcare facilities and EMS provider policies shall apply to the student during the clinical rotation.
- Only one (1) student shall be assigned, per shift, to a field transport unit.
- A maximum of two (2) students may be assigned to one (1) healthcare facility preceptor.

IV. MINIMUM CLINICAL REQUIREMENTS

- Complete a minimum of twenty-four (24) hours of clinical experience
- Document at least ten (10) patient contacts. Actual patient names shall be omitted for privacy and HIPAA compliance.

Note: *All patient contacts shall remain confidential and follow HIPAA guidelines. No photos, names, or discussion, shall be posted on any electronic, internet or social media site.*

- Complete a clinical experience evaluation and describe the experience.
- Achieve a competency rating in all areas.
- Complete any additional requirements established by the training program.

Note: *To complete the clinical phase of training additional time shall be scheduled to meet the minimum program hours, ten (10) patient contacts, or to achieve a competent performance rating.*

V. STUDENT CONDUCT

- The conduct of the student reflects upon the individual, training program and EMT profession. Therefore, the EMT student shall conduct themselves in a professional and mature manner at all times.
- Student shall adhere to all policies in this manual and any additional training program policies and requirements. Failure to comply with policies and requirements will result in disciplinary action which may include dismissal from the training program.
- Student shall take an active role in his/her learning experience.

VI. DRESS REGULATIONS

- Student shall present a professional demeanor and adhere to the appropriate dress code of the training program and clinical sites at all times.
- Student shall have a wristwatch or digital watch with a second hand display and a stethoscope to obtain vital signs.
- Student must use proper hygiene at all times.
- Jewelry and cosmetics should be kept to minimum.
- Body piercing jewelry or grills may not be worn.
- Perfume, cologne, after shave or body sprays may not be used.
- Fingernails shall be short, clean and only clear nail polish may be used.
- Tattoos shall be covered.
- Hair color shall be a natural shade.

VII. ATTENDANCE

A minimum of twenty (24) hours are required to complete the clinical phase of training as established by each training program. The student is responsible to have the clinical preceptor document arrival and departure time on the evaluation form.

The student must be in the assigned area for the entire shift except for approved breaks. It is preferred that whenever possible, breaks and meal times should be taken when the preceptor takes these breaks.

Breaks and/or meals may not be combined and taken at the end of the shift.

A. TARDINESS

- Tardiness reflects that the student lacks self-motivation and professional behavior and may result in disciplinary action.
- Tardiness is not tolerated during the clinical rotation. In the event of unavoidable tardiness, the student must contact the assigned area or station and the training program of the anticipated time of arrival.

B. ILLNESS

- In the event of illness, the student must notify the assigned area/station and the training program regarding the absence.
- A medical clearance may be required to be rescheduled in order to complete the clinical phase of training.

C. MAKE-UP HOURS

- Make-up hours will be scheduled by the training program per training program policy.

VIII. SCOPE OF PRACTICE

- The student is allowed to observe and perform any skill that is in the State of California Code of Regulations, Title 22, Division 9, Chapter 2 - Emergency Medical Technician, Section 100063 – Scope of Practice of Emergency Medical Technician and Reference 802, and 802.1 – Los Angeles County EMT Scope of Practice which is approved by the Medical Director of the Los Angeles County EMS Agency in Reference 802.1.

IX. SUPERVISION

- During clinical, the student must be under the direct supervision of a clinical preceptor who meets the qualifications of a Principal Instructor or Teaching Assistant (e.g. physician, registered nurse, physician assistant, paramedic, AEMT or EMT) as per State of California Code of Regulations, Title 22, Division 9, Chapter 2 - Emergency Medical Technician, Section 100070 – Teaching Staff.
- The student is to be oriented to the clinical site, applicable policies and equipment.
- The student shall only perform skills and procedures within the scope of practice of an EMT.

Note: *Performing procedures outside the scope of practice of an EMT shall result in immediate dismissal from the training program.*

- The ability to lift patients will be based on policies and agreements with the healthcare facility, ambulance provider and training program (e.g. onto a gurney, procedure table, bed, stretcher, into a wheelchair or ambulance).

X. CLINICAL PERFORMANCE EVALUATIONS

The clinical preceptor has a significant impact on the student's performance and learning experience. The preceptor is the student's primary resource and reinforces what the student has learned, ensures that the technical skills are performed correctly, and provides constructive feedback and positive reinforcement. The preceptor shall evaluate and document the student's performance accurately and honestly on the training program evaluation form utilizing the performance criteria.

- A minimal rating of "satisfactory" is required to complete the clinical rotation using the pre-determined performance criteria.

XI. COMPLETION OF CLINICAL REQUIREMENTS

- The Clinical requirements must be completed by the date and time established by the training program.
- The student is responsible to ensure that all required documentation is complete by the end of the clinical shift and submitted by the date and time established by the training program.

XII. INJURY OR COMMUNICABLE DISEASE EXPOSURE

- If the student is injured while in an assigned healthcare facility, the student must comply with all healthcare facility and training program policies.
- If the student is injured while on an ambulance or in the station, the student must comply with all ambulance provider and training program policies.
- The student must notify the training program of the injury or exposure as soon as possible.
- The student must complete and submit all required paperwork to the clinical rotation site and training program.

XIII. PATIENT INTERACTION

Clinical is the only time that a student is able to practice actual patient interactions before certification and entering “the real world workforce”. The more interaction the student has the more confidence he/she gains in communicating and caring for patients. All patient information shall be confidential and follow HIPAA guidelines. The student shall:

- Introduce him/herself to the patient and family and identify that they are a student in the EMT training program.
- Make an effort to talk to the patient and family. Most people are pleased by the attention and are eager to share their specific problems except in unusual circumstances.
- Adopt a listening attitude and not argue with a patient or offer hopeless reassurance.
- Always direct specific questions from a patient or family member regarding medical care to the preceptor or medical personnel.
- Not discuss a patient’s condition with anyone not directly involved in the patient’s care (HIPAA Regulations). A patient’s right to privacy must be respected at all times.
- Treat patients with dignity and respect at all times.
- Patients have the right to refuse any or all medical care. Notify the preceptor if a patient refuses any assessment element or care.
- Cut off clothing only if requested to do so; must be in the presence of the preceptor.
- Never remove a patient from spinal immobilization without physician authorization and in the presence of the preceptor.
- Never transport a patient to another area without a healthcare provider present and in the presence of the preceptor
- Act as the patient advocate, respecting privacy, autonomy, and intervening if necessary to ensure appropriate care.

XIV. STAFF INTERACTIONS

Clinical allows the student to gain further understanding of the roles and responsibilities of medical professionals involved in healthcare, the EMS System, and the importance of developing a good working relationship with various healthcare facilities and potential co-workers. The student shall:

- Be assertive in seeking out learning activities to enhance the clinical experience.
- Never hesitate to ask questions regarding patient care.
- Observe and learn different ways of doing procedures. However, do not participate if poor practices are encountered. Do not argue with staff, but ask for clarification as to why a procedure was done in that specific way.
- Keep voice level down in the clinical area.
- Keep cell phones on silent and other electrical devices off and use only in designated areas during breaks.

XV. ROLE OF THE PRECEPTOR

The clinical preceptor shall be a physician, registered nurse, physician assistant, paramedic or an EMT who meets the qualifications of a principal instructor or teaching assistant. The preceptor shall:

- Serve as the student's advocate and role model.
- Help the student make the transition from the classroom to the field.
- Supervise the student's clinical experience.
- Orient student to all applicable healthcare facility or ambulance employee policies.
- Orient student to all applicable equipment.
- Help the student to practice assessment and therapeutic communication skills with actual patients.
- Provide alternate applicable experiences if the department or call volume is slow.
- Complete the student's clinical performance evaluation accurately and honestly.
- Provide constructive feedback and positive reinforcement.

XVI. CLINICAL EXPERIENCE

*The clinical experience is designed to integrate didactic and practical knowledge. The clinical experience allows students to observe various aspects of the EMS System, put into practice the skills and medical information learned, and employ therapeutic communication techniques. **Not all objectives will be accomplished by every student due to the varied experiences available.***

A. CORE CLINICAL OBJECTIVES

During the clinical rotation, the student should be able to observe and participate in as many EMS related activities available and write a brief description of the experience.

1. ROLES, RESPONSIBILITIES AND PROFESSIONALISM

- Discuss the risks and responsibilities of emergency response and transport.
- Develop and maintain rapport with healthcare professionals.
- Demonstrate integrity and self-motivation as an EMT professional during the clinical and field experience.

- Conduct self in a professional manner at all times.
- Treat all patients, family members, caregivers, and bystanders with respect and dignity.

2. SAFETY & WELLNESS

- Use appropriate BSI precaution.
- Ensure personal safety.

3. THERAPEUTIC COMMUNICATION

- Practice interview skills including patients with special needs.
- Instill patient confidence through the use of appropriate communication techniques.
- Demonstrate sensitivity and provide support for the physical and emotional needs of the patient and the family.
- Discuss interview techniques that may be used when performing a patient assessment

4. DOCUMENTATION AND RECORD KEEPING

- Give a brief organized and accurate oral patient report to a healthcare provider and document this information appropriately on a training program Patient Care Record (PCR).

5. CLINICAL BEHAVIOR & PSYCHOMOTOR SKILLS

- Perform a primary and secondary assessment and reassess patients of various age groups and determine the chief complaint.
- Discuss the pathophysiology, signs and symptoms, and appropriate prehospital care for patients encountered during the clinical or field experience.
- Perform and document patient vital signs.
- Demonstrate the proper techniques for lung auscultation and correctly interpret the findings.
- Demonstrate proper airway management.
- Demonstrate and/or discuss basic resuscitation procedures.
- Assist with non-invasive patient care procedures during trauma emergencies (e.g. hemorrhage control, splinting, spinal immobilization, etc).
- Assist with non-invasive patient care procedures during medical emergencies (e.g. AED, CPR, oxygen administration, ventilation, ECG leads, etc).
- Demonstrate the administration of physician prescribed emergency medications (e.g. nitroglycerin, bronchodilator inhalation, Epi-Pen, etc.).
- Describe the technique used in moving patients onto a gurney, procedure table, bed, stretcher, wheelchair, or into the ambulance.
- Demonstrate and document a neurological assessment to include the Glasgow Coma Scale (GCS), the Cincinnati or the Los Angeles County Stroke Scale to determine neurovascular function and deficits.

B. FIELD OBJECTIVES (ADDITION TO CORE OBJECTIVES)

During the field rotation, the student should be able to observe and participate in as many EMS related activities available and write a brief description of the experience. This rotation allows the student to experience what it is like to be a member of an ambulance crew. The student shall be oriented to applicable ambulance employee policies and equipment during the field rotation

1. AMBULANCE OPERATION

- Assist with the ambulance inventory and restocking procedures (i.e. locating, inspecting, and preparing equipment).
- Observe the risks and responsibilities of emergency response and transport.
- Assist with and observe scene management.

2. SERVE AS TEAM MEMBER

- Perform a primary and secondary assessment and reassess patients of various age groups and determine the chief complaint.
- Participate in patient care when able and give a report at a healthcare facility or to EMS personnel.
- Assist paramedics with patient monitor operations, placing ECG leads, prepare IV set-up, Nebulizer set-up, etc.
- Assists in triaging patients during an MCI.

3. SAFETY & WELLNESS

- Use appropriate BSI precautions at all times.
- Ensure personal safety at all times.
- Observe how patients are extricated and describe the equipment used.
- Observe safe operations at the scene of a hazardous materials incident.
- Observe techniques for prevention of response related injuries and exposures including safe lifting and moving of patients and equipment.

4. COMMUNICATION AND DOCUMENTATION

- Trace how a call moves through the EMS system from the beginning to call completion.
- Describe the lines of communication between dispatch, the station, EMS, and healthcare facility personnel.
- Listen to transfer of care reports between healthcare facility personnel and EMS personnel.
- Document assessment findings accurately on the training program's PCR.

C. HEALTHCARE FACILITY OBJECTIVES (ADDITION TO CORE OBJECTIVES)

During the healthcare facility clinical rotation, the student should be able to observe and participate in as many EMS related activities as available and write a brief description of the experience. The emergency department (ED) is preferred to allow the student to experience how the ED works and the patient is cared for when a patient is brought in. If not feasible, other healthcare facilities may be used (See definition). The student shall be oriented to applicable healthcare facility employee policies and equipment during the healthcare clinical rotation.

1. SERVE AS TEAM MEMBER

- Observe the interaction between the healthcare team (e.g. RNs, LVNs, ED technicians, paramedics, physicians, and other ancillary professionals).
- Observe various specialty areas and the patient flow involved in these units (e.g. maternity, nursery, intensive care, and operating room).
- Observe various ancillary departments and describe how these departments may play a role in patient care (e.g. triage, emergency department admissions, X-ray, lab, CT, MRI, Cath lab, physical therapy, respiratory, social services, etc.).
- Participate in assessment, patient care and when able, give a report to healthcare facility or EMS preceptors.
- Assist in triaging patients in the triage/intake area.
- Observe and assist with the admission process of patients transported by prehospital personnel.

2. COMMUNICATION AND DOCUMENTATION

- Listen to paramedic runs if the healthcare facility is a Base Hospital.
- Listen to transfer of care reports between healthcare facility personnel and EMS personnel.
- Document assessment findings accurately on the training program's PCR.

XVII. SUGGESTED APPENDICES

In order to complete the Clinical Manual, it is suggested that that you include the following documents specific to your school.

- A. Reference 802.1
- B. Training Program PCR
- C. Hospital/Health Facility Evaluation or Field Evaluation
- D. Performance Criteria
- E. Los Angeles County Prehospital Code of Ethics
- F. Exposure/Injury Report Form