

EMT-Basic Student Clinical Information

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Clinical Directory

Action Care Ambulance	720-870-4705
Centennial Health Plaza	303-699-3060
Pridemark	303-984-1911
Presbyterian/St.Luke's Emergency Department	303-839-7111
RMC Emergency Department	303-320-2455
RMC Triage	303-320-2455
Sky Ridge Medical Center Emergency Dept.	720-225-1900
SMC Emergency Department	303-788-6911
SMC Triage	303-788-4371
The Medical Center of Aurora Emergency Dept.	303-695-2628

General Guidelines For Students Clinical Experience Hospital And Field Clinicals

1. Nursing students, EMT-B, EMT-I, and EMT-P students and certified EMT-Bs, EMT-Is, and EMT-Ps are allowed to do clinical rotations in the Emergency Department.
2. No more than two students may be scheduled for clinical rotation through the SMC Emergency Department at one time. No more than one student may be scheduled for clinical rotation at PSL, TMCA, Rose, Sky Ridge or Centennial Emergency Departments.
3. Upon arrival in the Emergency Department the student should report to the nurse in charge. The nurse will arrange for orientation to the department and will assign a preceptor. The preceptor should be made aware of any specific objectives the student may have for clinical experience.
4. The ED staff is at all times in charge of the evaluation and treatment of patients in the Emergency Department. All activities will be under their direction. Patient care cannot be compromised at any time.
5. Students must arrive on time, and if unable to be present, must notify the charge nurse of the Emergency Department at least two hours prior to their assigned time.
6. Obviously, questions will arise and are encouraged. Under no circumstances is a student to question or challenge decisions in front of the patient, patient's family or bystanders.
7. All procedures that the student may perform in the Emergency Department are listed on a separate sheet and depend on the level of training. If there are any questions about the performance of a skill, the student should have a preceptor demonstrate first, or directly supervise the performance. Some skills may be performed only under direct supervision. This policy must be adhered to.
8. Remember, the rules of confidentiality of patient information must be observed at all times.
9. The charge nurse has the option to dismiss any student from the clinical area at his/her discretion.
10. Included in the ED clinical rotations is a half-hour lunch break to be scheduled by the nurse in charge.
11. The EMS lounge and refreshments within it are for use by hospital staff and on duty EMS crews only.
12. Bring appropriate necessary equipment: safety mask/goggles, stethoscope, watch with a second hand, pen, trauma shears, and pen light.

13. Emergency Department clinicals may be scheduled only for the following shifts:

SMC 9 AM to 5:30 PM 5:00 PM to 1:30 AM 7:00 PM to 3:30 AM	TMCA 9:00 AM to 5:30 PM 5:00 PM to 1:30 AM	RMC 7:00 AM to 3:30 PM 3:00 PM to 11:30 PM
Centennial 11:00 AM to 7:00 PM 7:00 PM to 3:00 AM	Sky Ridge Friday/Sat. 2:00 PM to 10:30 PM	PSL 7:00 AM to 3:00 PM

14. ED and vital signs clinicals will be scheduled in class with the Clinical Coordinator.
15. All HealthONE facilities are smoke-free environments. During the clinical experience, there is to be no smoking on hospital property.

EMT-Basic Clinical Requirements

1. The student is required to complete 54 hours of clinical experience:
 - a. Twenty-four hours in an Emergency Department
 - b. Twenty-two hours with a pre-hospital EMS agency
 - c. One four-hour shift (for vital signs) in triage
 - d. One four-hour commitment in the Simulation Model/Helper Program
2. The Clinical Coordinator will inform the students when clinical shifts may be scheduled.
3. The student should arrive at least 15 minutes prior to the start of the clinical.
4. All clinical experiences must be completed prior to sitting for the final exam.
5. Students must arrange clinical rotations through the HealthONE EMS office.
6. When circumstances prevent the student from reporting for a clinical experience, he/she must give notification. Notify the agency involved or the clinical area and speak with the individual in charge. Missed clinicals must be rescheduled through the HealthONE EMS office, (303) 788-6317. Clinical hours are valuable and often difficult and time consuming to reschedule. If a student misses a clinical, or there is a need to reschedule for any reason, a \$50.00 rescheduling fee will be assessed per clinical and must be paid to the front office staff prior to rescheduling. Clinicals are scheduled two weeks out, no exceptions.

If any of the following criteria are met, a rescheduling fee will not be charged. The clinical is noted as a missed clinical and must be rescheduled.

- a. Death in the family with submission of a memorial card.
- b. Illness with a written doctor's excuse.
- c. Illness of significant other/child with written doctor's excuse.

- Each student is limited to a total of two (2) missed clinicals. More than two (2) missed clinicals will be cause for dismissal from the program.
7. Students must report for clinicals properly attired (i.e., EMS Program shirt, blue pants, dark shoes). Improper attire will result in refusal of clinical experience.
 8. Unprofessional conduct in the classroom or clinical area may result in dismissal from the program. This includes any use of vulgarity or harassment.
 9. All evaluation forms (from clinical and field experiences) must be completed and submitted to the EMT Course Coordinator at the class session following each clinical or field ride. A total of ten (10) patient contact report forms must be submitted to the Course Coordinator prior to course completion.
 10. Unexcused absence from a clinical, "cutting out" early on a clinical, or failing to report promptly for the clinical, are grounds for dismissal.

EMT-Basic Emergency Department/Ambulance Rotation

EMT-B students will have the following education before starting clinical or field rotations:

1. Background in anatomy and physiology
2. Patient assessment including history taking
3. Classes in monitoring of vital signs & neurological status
4. CPR
5. Classes in shock management
6. Classes on respiratory system and use of oxygen equipment
7. Trauma assessment and spinal immobilization
8. Extrication and packaging of patient
9. Movement and transferring of patient

Course Clinical Objectives

1. Allow the student the opportunity to observe and participate in the care and assessment of patients in the hospital and prehospital settings.
2. Allow interaction between the student and hospital and prehospital personnel.
3. Allow the student, under direct supervision of experienced hospital or prehospital personnel, to perform various skills that have been taught during the course.

Each student is responsible for the rotation evaluation forms and field reports and must bring forms to all clinical rotations.

Guidelines For EMT-Basics

Skills and procedures the EMT-Basic student may perform during clinicals:

- A. Observe in the triage procedure under nursing supervision.
- B. Take vital signs including BP, T, P, and R after validation of skills by staff.
- **C. Assess level of consciousness including neuro checks, pupils, movement, sensation, orientation, and mental status with supervision.
- D. Meet helicopter patients with staff.
- **E. Apply cardiac monitor electrodes with supervision.
- **F. Use bag/mask as needed with supervision.
- **G. Perform external cardiac compressions under direction.
- **H. Maintain airway of unconscious patients including insertion of oral and nasal pharyngeal airways.
- **I. Apply oxygen under direction.
- J. Control bleeding with elevation and pressure.
- **K. Evaluate extremity injury and stabilize with splinting including assessment of pulses, color, edema, temperature, and sensation.
- **L. Irrigate eyes under direction.
- M. Transport patients in wheelchairs and carts and assist with moving patients.
- N. Perform physical assessment of head, neck, thorax, abdomen, and extremities.
- **O. Apply PASG under direction.
- P. Do wound preps after instruction and verification of skill.
- **Q. Suction airway using French catheters and tonsil suction under direct supervision.
- **R. Administer activated charcoal for known or suspected toxic substance ingestion.
- **S. Administer nitroglycerine tabs or spray for cardiac chest pain.
- **T. Apply and utilize automated external defibrillator.

Certified EMT-Bs only:

Certified EMT-Bs who have had a supplemental course in IV insertion and management may start IVs, scalp vein needles, and angiocaths including connecting appropriate tubing, but not including addition of any medication. Calculate rate of infusion. Maximum of two attempts per patient for IV insertion.

**Under direct supervision -- means that a nurse, physician or qualified Emergency Medical Technician, must be present throughout performance of the procedure.

Dress Code

While enrolled in the EMS Program, during hospital and field clinical rotation settings and in all educational areas including the classroom, students are expected to be properly attired and neatly groomed. If students are not dressed appropriately, they will be asked to leave. Class work and clinical rotations must be rescheduled based on the rescheduling policy. If unprofessional attire continues to be worn, the student may be terminated from the EMS program.

Classroom

Nametags:	Must be worn above the waist in classroom and labs
Shirt:	Must have collars and sleeves, covering underarms and torso completely. No inappropriate art, patches, or logos. HealthONE Education Program shirt must be worn during lab sessions.
Slacks:	Must be worn at waist level, no holes or tears – no shorts
Shoes:	Shoes with socks are required, no sandals or flip-flops
Hats:	No hats or caps allowed
Personal:	Good body hygiene must be maintained. Students must be clean-shaven or facial hair must be neat and trimmed. Proper undergarments must be worn and not be visible. Tattoos or body art must be covered. Clothing with sexually explicit or suggestive graphics may not be worn. No display of midriffs or cleavage.

Hospital and Field Clinicals

Shirt/Jackets:	HealthONE EMS Education Program shirt. No agency uniforms, patches or logos.
Slacks:	Dark blue, black – no denim jeans
Shoes:	Sturdy shoes with socks – no sandals, open-toed shoes, clogs, canvas shoes, cowboy boots, or crocs
Jewelry:	Watches and wedding rings are acceptable. (Jewelry should be safe and unobtrusive.) The only visible piercing allowed is a single post earring in each ear. Ear gauges, barbells and labrets are not allowed.
Personal:	Good body hygiene must be maintained. Extremes in fashion are to be avoided. Long hair must be worn (tied) away from the face, unnatural hair colors are not allowed. No excessive makeup. Students must be clean-shaven or facial hair must be neat and trimmed. Proper undergarments must be worn, but not visible. No artificial nails or extenders are allowed. Tattoos or body art must be covered.
Name tags:	Must be worn above the waist at all times. Name and picture must be clearly visible. Non-professional insignia such as pins or buttons are not allowed.
Fragrances:	No perfumes or colognes. Many patients, family members, and employees are sensitive to these scents.

EMS Course Requirement Check Off Sheet

Name: _____ Phone _____

Address: _____ Email _____

Clinical Sign-up Confirmation Form

Vital Signs			
Emergency Department			
Ambulance			
Community Service			

Hepatitis immunizations

First _____ Second _____ (must have completed to sign up for any clinical)

Third _____ MMR _____ Chickenpox _____

Tetanus _____

Instructor _____ pager _____

Policy Review: (Please refer to full policy in manual)

Dress: EMS program shirt, blue or black slacks, dark shoes

Equipment: Name badge, stethoscope, pen, lunch, BP cuff for vital signs

Upon arrival: Be 15 minutes early and announce your self to the charge nurse.

Absence Policy: Immediate notification must be made to the clinical site, (please ask to speak to the individual in charge), and the instructor at the HealthONE EMS office.

There is a \$50.00 fee to cancel and reschedule a clinical date. If more than two clinicals are rescheduled the student will be dropped from the course. There will be a \$50.00 fee for failure to schedule clinicals on the date defined in the course syllabus.

Important numbers:

Swedish ED/Triage	303-788-6751	Centennial	303-699-3163
Rose ED/Triage	303-320-2455	PSL ED	303-839-7111
The Med Ctr of Aurora	303-873-5252	Pridemark	303-984-1911
Sky Ridge ED/Triage	720-225-1900	Action Care	720-870-4705
HealthONE EMS Office	303-788-6317		

Student Signature _____

Vital Signs Sign-Off Form

Clinical Location _____

Name:
Date:
Comments:
Preceptor signature:
Please PRINT preceptor name:

Vital Signs Sign-Off Form

Clinical Location _____

Name:
Date:
Comments:
Preceptor signature:
Please PRINT preceptor name:

EMT Basic Clinical Rotation Sign-Off Form

Student name:	Date:	Location:
Preceptor name: (Print)	Time in:	Time out:

ROTATION TYPE AND NUMBER: (Please Circle one) **Ambulance 1 2** **Emergency Dept. 1 2 3**

Please indicate how many times the student performed or observed the following skills during the rotation.

SKILLS:

Oxygen administration:	Positive pressure ventilation:	Oral/nasal airway:
CPR:	Bleeding control:	Traction splint:
Extremity splint:	Spinal immobilization (LSB):	KED:
Cervical collar application:	Helmet removal:	Scoop stretcher:
Patient assessment:	Childbirth:	Nitro administration:
Charcoal administration:	Oral glucose administration:	MDI administration:

Please indicate the number of patients with the following chief complaint(s) the student was exposed to.

NATURE:

Cardiac/chest pain	Respiratory/SOB	Altered mental status
Cardiac arrest	Seizure	Diabetic emergency
Allergy/anaphylaxis	Poisoning/OD	Alcohol
Abd. pain	SIDS	Heat/cold
Drowning/near drowning	Behavioral/psych	OB/Gyn
Soft tissue/burn	Chest trauma	Abd trauma
Head trauma	Face/eye trauma	Fractures
GSW	Assault	Other
Other	Other	Other

Preceptor comments:			
Preceptor signature:	EMT-P <input type="checkbox"/>	EMT-B <input type="checkbox"/>	RN <input type="checkbox"/>
Student comment:			
Student signature:			

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Preceptor name: (Print)	Time in:	Time out:

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Student signature:			

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Preceptor signature:	EMT-P <input type="checkbox"/>	EMT-B <input type="checkbox"/>	RN <input type="checkbox"/>
Student comment:			
Student signature:			

EMT Basic Clinical Rotation Sign-Off Form

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Preceptor name: (Print)	Time in:	Time out:

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Other	Other	Other

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Student comment:			
Student signature:			

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Soft tissue/burn	Chest trauma	Abd trauma
Head trauma	Face/eye trauma	Fractures
GSW	Assault	Other
Other	Other	Other

Preceptor comments:			
Preceptor signature:	EMT-P <input type="checkbox"/>	EMT-B <input type="checkbox"/>	RN <input type="checkbox"/>
Student comment:			
Student signature:			

**Student Assistant
Sign-Off Form**

Event:	Date:	Hours:	Coordinator Initials

Student name: _____

Clinical Rescheduling Form

I _____ (print name) missed my scheduled Triage, Emergency Department, Ambulance ride (circle one) on _____ (date), _____ (time). I understand that the first available shift is at least two weeks from today.

I have advised my EMS Instructor _____ of this missed shift. I have attached the \$50.00 rescheduling fee in the form of cash, credit card or cashier's check (circle one). Please contact me at _____ (student phone number) to reschedule this shift. I will await your call. Thank you for your help in this matter.

Student signature

Date

EMS Instructor

Date