

**ORANGE COUNTY EMT  
EMERGENCY MEDICAL TECHNICIAN PARAMEDIC**



**CLINICAL INTERNSHIP COURSE SYLLABUS**

**JANUARY 1<sup>ST</sup> 2023- DECEMBER 31<sup>ST</sup> 2023**

## Clinical Site Locations

### **UCI Medical Center**

University California Irvine Medical Center  
101 The City Drive South  
Orange, CA 92868  
[www.ucirvinehealth.org](http://www.ucirvinehealth.org)  
Phone: (714) 456- 7890

### **West Anaheim Medical Center**

Prime Healthcare  
3033 West Orange Avenue  
Anaheim, CA 92804  
[www.westanaheimmedctr.com](http://www.westanaheimmedctr.com)  
Phone: (714) 827- 3000

### **CHOC**

Children's Hospital of Orange County  
1201 West La Veta  
Orange, CA 92868  
[www.choc.org](http://www.choc.org)  
Phone: (714) 997-3000

### **Orange County Global**

1001 N Tustin Ave  
Santa Ana, CA 92705  
[www.orangecounty-gmc.com](http://www.orangecounty-gmc.com)

### **Huntington Hospital**

100 West California  
Pasadena, CA 91105-3097  
[www.huntingtonhealth.org](http://www.huntingtonhealth.org)  
(626) 421-7733

St. Mary Medical Center  
1050 Linden Ave.  
Long Beach, CA 90813  
[www.st-marys.org](http://www.st-marys.org)  
(562) 491-9000

### **Administrative Contacts**

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**Course Eight:** Clinical Internship

- 1. **Skills Lab:** EMTP-8L  
Hours: 8
- 2. **Clinical Internship:** EMTP-8CI  
Hours: 168

**Pre-Requisites**

- a) Completion of all EMT-P Courses 1-6
- b) Completion of EMT-P Skills Lab Course

**Course Description:**

The goal of the clinical educational experience is to ensure that each student interacts with patients and provides care while under the direct observation of a preceptor or instructor in a controlled clinical environment. Students will conduct a patient history and physical examination followed by a discussion regarding the patient’s diagnosis and field care plan. If the patient needs a therapeutic intervention, the preceptor will evaluate and document the student’s performance as compared to the accepted standard.

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**Course Content**

- Section 1:** Medical Examiner
- Section 2:** Emergency Department
- Section 3:** Trauma
- Section 4:** Operating Room
- Section 5:** Obstetrics
- Section 6:** Pediatrics

**Course Completion Requirements**

- 1. Students must attend the Clinical Orientation
- 2. Students must complete 168 hours of Clinical Internship
- 3. Students must achieve a meets-expectations on their final evaluation
- 4. Students must record all patient contacts and log them into FSDAP
- 5. Students must turn in their signed daily and major evaluations upon completion

**Course Objectives**

The objective of the Clinical Internship is to expose the Paramedic student to as many patients as possible throughout all patient demographics. Students will have the opportunity to improve upon the skills they learned during Skills Labs and apply them towards live patients. Students will track their patient contacts/procedures and apply them towards the minimum standards listed on the matrix below. The minimum requirements do not need to be completed by the end of the Clinical Internship, however must be completed by the end of the Capstone Field Internship.

Paramedic Procedures	Min #	Sims Used	# Sims that = 1 Pt.
Safely Administer Medications	25	Yes	2
Airway Management	50	Yes	2
Live Intubations	8	Yes	2

Safely Gain Venous Access	20	Yes	2
Ventilate a Patient	5	Yes	2
Assessment of Newborn	2	NO	4
Assessment of Infant	2	NO	0
Assessment of Toddler	2	NO	0
Assessment of Preschooler	2	NO	0
Assessment of School Agers	2	NO	0
Assessment of Adolescents	2	NO	0
Assessment of Adults	20	Yes	2
Assessment of Geriatrics	10	Yes	2
Assessment of Obstetric Patients	4	Yes	2
Assessment of Trauma Patients	10	Yes	2
Assessment of Medical Patients	20	Yes	2
Assessment of Psychiatric Patients	5	Yes	0
Assessment and Plan RX of Chest Pain	5	Yes	2
Assessment and Plan RX of Respiratory	5	Yes	2
Assessment and Plan RX of Syncope	5	Yes	2
Assessment and Plan RX of Abdominal	5	Yes	2
Assess and Plan RX of Altered Mental	5	Yes	2
Field Internship Team Leads	20	Yes	2

### **Policies and Procedures**

1. All Internships are verified prior to the start of the program to guarantee each student will have a Clinical and Field Internship following the didactic portion of the course
2. All students who successfully complete the didactic portion of the course with an 80% or better will have a Clinical Internship
3. All Students who successfully complete the Hospital Clinical Internship with a “Meets. Expectations” will move to the Field internship
4. Field Preceptors and Internships will be assigned to students based off of the students. personality and distance from home. Students must complete the internship with a “Meets Expectations” to continue with Program
5. At no time will a student be substituted for staff during clinical or field internships

### **Clinical Attendance Policy**

#### **Sick Days / Absences**

- You will be allowed a total of 2 sick days for the duration of the program. Upon your 3rd sick day, you will be suspended for 2 weeks from clinicals. More than 3 sick days will result in expulsion from the Paramedic Program, at the discretion of the Clinical Coordinator.
- You must call the Clinical Coordinator and the clinical / field site as soon as possible to notify them of your absence
- You must complete the ‘Clinical Absence Form’ the following day and turn it in to the Program Director.
- If you fail to turn paperwork in for a scheduled clinical, this will be considered an absence.
- A no show will result in a two week suspension from clinicals

- You must complete the 'Clinical Absence Form' the following day and turn it in to the Program Director.
- This will result in losing the privilege of participating at that particular clinical site and a two week suspension.
- Should this infraction occur more than once, the student will be expelled from the paramedic program at the discretion off the Program Director and Clinical Coordinator.

### **Leaving Early**

- If you need to leave a clinical site for any reason, you must contact the staff at OCEMT. If after regular business hours, contact the Clinical Coordinator
- You must complete the 'Clinical Absence Form' the following day and turn it in to the Program Director.
- Leaving early from a clinical site or failing to notify the clinical coordinator of leaving early will result in a suspension of 2 weeks of clinicals.

### **Schedule Changes**

During the clinical portion of the program, students are expected to only submit/request days at clinical sites in which they are available to attend. If a student schedules a clinical by error or needs to adjust their schedule for any reason the following consequences will occur

- You have the ability to reschedule (1) Shift without penalty
- At your request to change a 2nd clinical shift, 10 points will be deducted from your Clinical Score
- At your request to change 3 or more clinical shifts 30 points will be deducted from your score and you will be placed on a 2 week Clinical Suspension
- Any clinical shift that has been submitted to the clinical site for approval will not be changed and must be attended by the student or incur penalty for a clinical absence.

### **General Conduct**

1. You are a guest at our clinical sites and should act with integrity and courtesy at all times. You should treat each clinical as a first job interview. If you behave inappropriately (i.e. sleeping, being lazy or unhelpful, creating a disturbance, etc), you can assume that clinical site will likely not hire you once you acquire a license...they will also likely tell their friends at other departments...so act accordingly or expect to not be returning to that clinical site.

2. Students are never allowed to be on any computer, cell phone or other electronic device at any clinical site unless approved by the preceptor for educational purposes. Any students found accessing these devices for non-educational purposes at a site will be subject to immediate program termination.

3. The student will maintain patient confidentiality in compliance with the Health Information Portability and Accountability Act (HIPAA). Breach of this policy will result in suspension, termination from the program, and/or monetary fine(s).

4. All clinical requirements must be done on a voluntary (unpaid) basis while acting in the capacity of a

student. Students are not allowed to attend clinicals, either in hospital or on the ambulance, where they are employed or volunteer. Violation of this policy will result in suspension and possibly expulsion.

5. The student is expected to arrive 15 minutes before the start time of the rotation.

6. The student will report to the charge nurse, supervisor, or chief at the clinical/field site upon arrival.

7. The student will act under the direct observation of appropriate licensed or certified personnel at all times. No ALS skills may be performed out of sight of a preceptor.

8. The student will make the best use of the clinical/field experience and will not remain idle during opportunities to participate in patient care. This includes staying for the duration of the shift scheduled unless verified by the shift preceptor AND clinical coordinator.

9. The student will act with concern for the safety of himself/herself, the patient, and others at the site, and will not cause harm to anyone.

10. Any injury or exposure at a clinical/field site must be reported to the clinical coordinator immediately (regardless of day or time) and a written incident report must be submitted within 48 hours of the event. During these events students, should be treated as any other member of the site team and follow the sites protocols. Respond Right. policy states that each student is responsible for their own medical needs and that Respond Right. EMS Academy assumes NO financial or other responsibility for treatment as a result of injury to a student during participation in the Paramedic program. All expenses, whether emergency or non-emergency will be the responsibility of the student. **Orange County EMT does not financially cover any medical consultations or treatments.**

**11. A complaint against a student will result in the following actions:**

a) First complaint

- Student will be Placed on Academic Probation and counseled

b) Second complaint

- Student will be counseled and suspended from internships for 14 days

c) Third complaint

- Student will be dropped from the Program

e) If the severity of the complaint is found egregious enough, or negligent the student may be dropped from the internship after the first complaint

12. The relationship between student/preceptor is to be a professional one. There is no dating or physical relations between students and preceptors. Violation of this policy will result in a 2-week suspension and possible expulsion from the program.

13. Clinical site preceptors may not be a spouse, boy/girlfriend, partner, parent, family member or close personal friend. Violation of this policy will result in a 2-week suspension and possible expulsion from the program.

14. Any student caught altering, forging or changing clinical data, dates, hours, data or signatures will be immediately expelled from the Paramedic Program. Cheating will not be tolerated either during the academic session or the clinical completion phase of your program.

15. Signatures and initials from preceptors must be the original signature. No copies or alterations will be tolerated. Any tampering, copying or altering of a signature will be immediate grounds for dismissal from the program.

### **Conflict in Clinical Internship**

If the student experiences a conflict in the Field Internship or identifies issues between himself/herself and the assigned preceptor the student must inform the Field Internship Coordinator immediately via phone and document and submit the issue in writing. The Field Coordinator is available to facilitate communication and problem solving so that the issue does not impact success of an internship.

### **Clinical Internship Extensions**

Early identification, intervention and notification to the Field Internship Coordinator and Paramedic Program Director of issues in clinical are the most effective ways of avoiding the need for an extension. An extension of a clinical phase is at the discretion of the Program Director. If granted, an internship extension will be completed in increments of 50 hours, to a maximum of 100 hours. If a student cannot satisfy the requirements of the internship within a total of 340 hours, the student would fail the Clinical Internship.

### **Uniform and Grooming Standards**

1. All students must maintain personal hygiene through all portions of the course
2. No ear rings or piercings of any kind may be visible
3. No facial hair other than a moustache is acceptable
4. Tattoos must be covered by long sleeves, pants or collared shirts
5. OCEMT Uniform must be worn at ALL times unless otherwise advised by the Administration:
  - a) Embroidered Polo
  - b) Pants
  - c) Black Belt
  - d) Black Steel Toed Boots or Shoes

### **Student Conduct**

Students are expected to conduct themselves in accordance with the professional expectations for paramedics at all times. Students are reminded that they are representatives of Orange County Emergency Medical Training Paramedic Program whenever and wherever they are involved with course-related activities. Professional conduct is essential to a successful course experience and EMS career.

### **Clinical Suspension**

A student who displays academic deficiencies, adjustment problems, or disciplinary problems during the Clinical Internship may be suspended from the course until the behaviors are resolved. Any student who displays these characteristics during the previous courses, may have their Clinical Internship suspended until the student is found capable of functioning in the clinical environment. The suspension may not occur for longer than 30 days from the end date of the previous course or 30 days from the time the suspension is issued. Students who are placed on suspension for any reason prior to their internship or during the internship may be dismissed from the program if they cannot complete the course due to the actions and or behaviors that led them to the suspension.

### **Injuries**

Any student that is injured during the Clinical Internship must report the injury to their preceptor immediately. The Clinical Coordinator shall be notified via phone, email, or text message advising of the situation and the status of the student. When able to do so, but no later than 24 hours following the injury, the student must write a narrative describing the occurrence and submit it to the Clinical Coordinator.

### **American Disability Act**

*OCEMT will follow the policies of the ADA as defined through "The NREMTs Americans with Disabilities Accommodations Policy for Educators and Students."*

- a) For more information: [www.nremt.org](http://www.nremt.org) under general policies, ADA policy
- b) Request the ADA brochure through the Program Administrator

### **Technical Standards**

Orange County EMT's Paramedic Program is a comprehensive, intense program that places specific requirements and demands on the students enrolled in the program. The mission of the program is to provide students with the tools and structure needed to develop basic and advanced skills to provide medical care to individuals in a variety of settings. All policies and procedures found in the course catalog and syllabus must be met along with the expectations listed below. If a student is unable to meet the technical standards of the program with or without reasonable accommodation, the student will not be enrolled in the course, nor will they be able to complete it. Meeting the program's technical standards does not guarantee a student's eligibility for the NREMT or state certification exam.

### **Students enrolled in the Paramedic Program must demonstrate:**

1. The following values:
  - a) Integrity
  - b) Trust
  - c) Professionalism
2. The mental ability to think clearly and act decisively during emergency situations.
3. The ability to use proper body mechanics, motor control, sensory function, and have the coordination to perform physical examinations using accepted techniques. Students must have the hand and eye coordination needed to safely perform technical skills on patients
4. Students must have ability to communicate effectively to all patients regardless of age, gender, or ethnicity, including colleagues and individuals from different cultural and social backgrounds. Students must be able to understand and speak the English language at a level consistent with competent professional practice.
5. Students must have the ability to document patient reports accurately, using proper English, and have the ability to calculate medication dosages using the appropriate math equations.
6. Students must have the ability to accept positive criticism and have a willingness to learn from their mistakes. Students must work as a team member and be committed to serving the community to the best of their ability.
7. Students must have the ability to be flexible and operate in dynamic environments, while always being a patient advocate, regardless of circumstances.
8. Students must have the physical strength to lift and carry patients any varying circumstances that includes up and down stairs.
9. Students will work in potentially dangerous environments and have the forethought to utilize proper Personal Protective Equipment and have the ability to expect the unexpected.
10. Students must display a command presence when working as a team leader, have the ability to maintain scene control, and have the knowledge and ability to order proper resources when needed.



### **Additional Resources**

During the Field Internship students must adhere to all policies and procedures set forth by Orange County EMT to include but not limited to:

1. Code of Conduct
2. Health and Safety
3. Disciplinary Action
4. Grievance Procedure

### **Clinical Affiliation Policies**

Students must comply with the policies and procedures of the affiliated hospital, or clinical site. Students must demonstrate a professional attitude toward patients, the hospital staff and any other person they are in contact with. Students must also be proactive in seeking out learning opportunities and assisting the staff by any means possible.

### **Required Vaccinations**

Students are required to purchase EMS Health Clearance to digitally store vaccination records on their personal phone, computer, or Ipad. Information to be given at orientation.

#### **1. TB skin test (PPD)**

- a) Must be current within the last 6 months and kept current while enrolled.
- b) Positive PPD, or history of TB requires a written chest x-ray clearance from MD within last 12 months.

#### **2. MMR – (Measles, Mumps, Rubella)**

- a) Must show proof of two MMR immunizations
- b) Positive titers for all three (MMR)
- c) If both TB Skin Test and MMR are needed, MMR must be administered with the second TB skin test

#### **3. Varicella Series (VZV)**

- a) Positive titer or immunization

#### **4. Hepatitis B Series & Titer (Quantitative)**

- a) No waivers or declinations will be accepted
- b) Must have proof of all three shots in the series and HBV titer results

#### **5. TDP (Tetanus, Diphtheria, Pertussis)**

- a) A tetanus booster within the last year, or
- b) If you have not received a tetanus booster within the last ten years, you MUST get a TDaP (tetanus, diphtheria, & pertussis) vaccination.

#### **6. Seasonal Influenza**

- a) Must be current each year or sign a flu declination form
- b) You must have this prior to clinical rotations.

#### **7. Covid**

- a) Covid Vaccinations are not required to enroll in the course
- b) Proof of a Negative Covid Tests may be required throughout the course if the student has been sick, or if required by Clinical and Internship sites.

*OCEMT does not require the Covid Vaccination for enrollment into its Paramedic Program, however our Clinical Sites do. This means that if you are not vaccinated you can enroll in the Program and successfully complete the Didactic and Skill Portions of the Course, but cannot be placed anywhere for the Clinical Internship. Since Clinical Internships are a Course Completion*

requirement as mandated through Title 22, of the California Health and Safety Code, students who do not attend a Clinical Internship, cannot complete the Program.

OCEMT is working on obtaining additional Affiliation Agreements with alternate Clinical Sites that do not require the Covid Vaccination, but do not currently have any. For these reasons, non-vaccinated students who move forward with the selection process need to know that there may be a significant delay in getting them placed for their Clinical Internship, or that they may not be able to be placed at all, resulting in the inability to complete the Program.

### Scoring Criteria

All patient contacts are to be documented in the student's logbook after each interaction and must be completed no later than the end of each shift. Students will evaluate themselves and will then be evaluated by their preceptors based on their performance throughout the shift. Students will be evaluated using the following rubric:

Scoring	Competency	Description
0	Does Not Meet Expectations	Unsuccessful: Required excessive/ critical prompting
1	Below Expectations	Marginal: Inconsistent, not yet competent
2	Meets Expectations	Successful: Competent, did not need prompting

### Daily Evaluations

After each shift the, student's logbook will be reviewed by the student and the preceptors. Based on the evaluations throughout the day for each patient interaction, an overall daily competency will be given. The following personnel are designated to sign evaluations:

1. Department Charge Nurse
2. Registered Nurse/Preceptor
3. OCEMT Hospital Preceptor with approval from the Charge Nurse, or Registered Nurse
4. OCEMT Clinical Coordinator with approval from the Charge Nurse, or Registered Nurse

### Fisdap

FISDAP is an online database used by students and programs to schedule and track skills competencies and evaluations during Skills Labs, Clinical Internships, and Field Internships. Students will access FISDAP each shift and transfer the information from their Skills Portfolio into the program.

### Grading Criteria

#### 1. Meets Expectations

- a) Students who receive a Meets Expectations for all Patient Interactions during a shift will receive 10 points towards their Course Score
- b) Students may receive a Below Expectations on a Patient Interaction during their shift and still achieve a Meets Expectations on their daily evaluation given the following:
  - Their cumulative shift score is 80% or above, calculated by dividing points earned by points possible

#### 2. Below Expectations Scoring

- a) Student's who's daily Patient Interaction scoring percentage is less than 80% will receive a Below Expectations evaluation for that shift.
- b) Students who receive a Below Expectations on their daily evaluation will receive 5 points

towards their course score for that shift.

### 3. Does Not Meet Expectations Scoring

- a) Students who receive a Does Not Meet Expectations on any Patient Interaction during a shift will receive a Does not Meet Expectations on their Daily Evaluation.
- b) Students receiving a Does Not Meet Expectations will not receive any Course Points for the shift it occurred in.

### Daily Evaluation Scoring Example

Pt Contacts	Points Possible	Points Earned	Percentage	Competency	Daily Points
32	32	26	81.25%	Meets Expectations	10

### Major Evaluations

There will be three major evaluations during the Clinical Internship. The evaluations will be completed at the end of shifts eight, sixteen, and twenty-four.

### Final Evaluations

The final evaluation will occur on the student's last assigned shift and will be completed by the students Preceptors, Program Director, and Program Medical Director. Students must receive a Meets Expectations during this evaluation or they will be dropped from the Course.

**Points Possible:** Clinical Internship

<b>Shift 1:</b> 10 Points	<b>Shift 9:</b> 10 Points
<b>Shift 2:</b> 10 Points	<b>Shift 10:</b> 10 Points
<b>Shift 3:</b> 10 Points	<b>Shift 11:</b> 10 Points
<b>Shift 4:</b> 10 Points	<b>Shift 12:</b> 10 Points
<b>Shift 5:</b> 10 Points	<b>Shift 13:</b> 10 Points
<b>Shift 6:</b> 10 Points	<b>Shift 14:</b> 10 Points
<b>Shift 7:</b> 10 Points	<b>Shift 15:</b> 10 Points
<b>Shift 8:</b> 10 Points	<b>Shift 16:</b> 10 Points
<b>Total Points: 240</b>	

### Affective domain

Affective Domain measures the student's attitudes, behaviors, and professional attributes, as well as Classroom and Field conduct. Students will be evaluated in these domains upon completion of each Didactic Course and with each Major Evaluation during the Clinical Internship, Field Experience, and Capstone Field Internship. Students must consistently demonstrate these attributes to successfully complete the Paramedic Program.

#### 1. Integrity

Examples of professional behavior include, but are not limited to: Consistent honesty; being able to be trusted with the property of others; can be trusted with confidential information; complete and accurate documentation of patient care and learning activities.

#### 2. Empathy

Examples of professional behavior include, but are not limited to: Showing compassion for others; responding appropriately to the emotional response 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.

### **3. Self- Motivation**

Examples of professional behavior include, but are not limited to: Taking initiative to complete assignments; taking initiative to improve and/or correct behavior; taking on and following through on tasks without constant supervision; showing enthusiasm for learning and improvement; consistently striving for excellence in all aspects of patient care and professional activities; accepting constructive feedback in a positive manner; taking advantage of learning opportunities

### **4. Appearance and Personal Hygiene**

Examples of professional behavior include, but are not limited to: Clothing and uniform is appropriate, neat, clean and well maintained; good personal hygiene and grooming.

### **5. Self- Confidence**

Examples of professional behavior include, but are not limited to: Demonstrating the ability to trust personal judgment; demonstrating an awareness of strengths and limitations; exercises good personal judgment.

### **6. Communications**

Examples of professional behavior include, but are not limited to: Speaking clearly; writing legibly; listening actively; adjusting communication strategies to various situations

### **7. Time Management**

Examples of professional behavior include, but are not limited to: Consistent punctuality; completing tasks, assignments on time, being to class on time, not leaving class early, no excessive absences.

### **8. Teamwork and Diplomacy**

Examples of professional behavior include, 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.

### **9. Respect**

Examples of professional behavior include, 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.

### **10. Patient Advocacy**

Examples of professional behavior include, but are not limited to: Not allowing personal bias to or feelings to interfere with patient care; placing the needs of patients above self interest; protecting and respecting patient confidentiality and dignity.

### **11. Careful Delivery of Service**

Examples of professional behavior include, but are not limited to: Mastering and refreshing skills; performing complete equipment checks; demonstrating careful and safe ambulance operations; following policies, procedures, and protocols; following orders.

### **Grading Criteria**

1. Students who receive a total of 18 points or above will complete the course without penalty
2. Students who receive a total of 17 points or less will have a 20% point penalty deducted from their total points, calculated from the Course total points
  - a) Students who are penalized will receive a counseling session to formulate an improvement plan

- b) The second evaluation with substandard scoring will result in a counseling session to formulate a new improvement plan
  - c) The third substandard evaluation will result in expulsion from the Program
3. Students who are grossly negligent in one of the domains can be dropped from the program after the first evaluation

**Scoring Criteria**

The affective domain is measured through 11 attributes that are worth up to 2 points each for every domain that the student displays. Students who receive an evaluation with a total score of 18 or above are considered to meet the standards of the profession and will complete the course successfully. Students who received a score less than 18 will have a 20% penalty deducted from the total Course points.

**Grading Criteria**

Scoring	Competency	Description
0	Does Not Meet Expectations	Unsuccessful: Failed Attribute
1	Below Expectations	Marginal: Inconsistent with Attribute
2	Meets Expectations	Successful: Consistent with Attribute

**Grading Scale: Clinical Internship**

Assignment	Total Points	Scoring Method	Grade Scale	Grade
Skills Lab	N/A	Pass/Fail	216-240	A
Internship	240	Pass/Fail/Percentage	192-215	B
Affective Domain	- 48 Points	Pass or Point Deduction	168-191	C
Affective Domain	- 48 Points	Pass or Point Deduction	144-167	D
Affective Domain	- 48 Points	Pass or Point Deduction	120-143	F
<b>TOTAL</b>	<b>240</b>			

**Clinical Coordinator or Faculty Observation:**

Students will have periodic visits from the Paramedic Program faculty and or the Clinical Coordinator. Visits will be arranged in advance between the paramedic preceptor and the OCEMT faculty and are designed to ensure the student is meeting the course objectives.

*Observations may be omitted due to unforeseen circumstances and hospital policies due to COVID*

**Academic Dishonesty**

Effective learning, teaching and research all depend upon the ability of members of the academic community to trust one another and to trust the integrity of work that is submitted for academic credit or conducted in the wider arena of scholarly research. Such an atmosphere of mutual trust fosters the free exchange of ideas and enables all members of the community to achieve their highest potential. In all academic work, the ideas and contributions of others must be appropriately acknowledged, and work that is presented as original must be, in fact, original. Faculty, students, and administrative staff all share the responsibility of ensuring the honesty and fairness of the intellectual environment of Orange County EMT.

### **Scope of Dishonesty**

This statement on academic integrity applies to all students at Orange County EMT. All students are expected to adhere to the highest standards of behavior.

### **Purpose of Policy**

- To clarify the expectations with regard to students' academic behavior, and
- To provide specific examples of dishonesty however does not include them all.

### **1. Plagiarism**

Plagiarism consists of taking someone else's ideas, words, or other types of work product and presenting them as one's own.

### **2. Fabrication or Falsification of Data or Records**

It is dishonest to fabricate or falsify data in the lab, clinical, and field internship phases, research papers, reports or in any other circumstances; to fabricate source material in a bibliography or "works cited" list; or to provide false information on a pcr or other document in connection with academic efforts. It is also dishonest to take data developed by someone else and present them as one's own. Students will be removed from the program.

### **Examples of falsification include:**

- Altering information on any exam, or class assignment being submitted.
- Altering, omitting, or inventing lab, clinical or field internship data to submit as one's own findings.
- This includes copying lab data from another student to present as one's own; and providing data to another student to submit as his/her own.
- Preceptor signatures for lab, clinical and field internships signed by anyone other than the assigned preceptor.
- Falsification of documentation in lab, clinical and field internship records.
- Duplicate lab, clinical and field internship data when submitting clinical books. This includes copies of signature pages, evaluations, worksheets, etc. Students will be removed from the program.
- Request an academic benefit based on false information or deception. This includes requesting an extension of time, a better grade, or a recommendation from an instructor.
- Engage in any other form of academic misconduct not covered here.

This list is not intended to be exhaustive. To seek clarification, students should ask faculty and administration for clarification. If it is found that a student alters, forges, duplicates or copies clinical data, signatures or paperwork, they will be immediately removed from the program.

## **Course Content**

**Content may vary due to hospital policy and availability, therefore all sections are not required for completion.**

### **Medical Examiner**

The purpose of this rotation is for the paramedic students to observe an autopsy and perform any skills approved by the Examiner.

**Objectives**

- Observe human anatomy
- Identify injuries resulting from traumatic event or disease process
- Needle Cricoid
- Needle Thorocostomy
- Intubation

**Emergency Department**

The purpose of this rotation is to allow the paramedic students to gain experience working with other medical personnel in the emergency room setting.

**Objectives**

- Assess patients of different age groups
- 12 Lead EKG, use and interpretation
- Interact with patients and their families
- Observe behavioral reactions to injury/illness.
- Operate oxygen administration equipment and give oxygen as many times as possible.
- Administer medications in all routes
- Perform CPR
- Establish IV access: Minimum of 30
- Draw and prepare blood samples for laboratory studies as many times as possible.

**Observe the following Procedures:**

- Central venous lines
- Arterial puncture for placement of arterial lines and blood gases
- Endoscopic procedures
- Neurological assessments
- Hemodynamic monitoring
- Urinary catheterization

**Online Medical Control:**

- Listen to radio communications between field units and the Telemetry MICN.
- Listen to radio communications between field units and telemetry control physician
- Review Base Hospital Orders with the MICN and Physician

**Trauma Center**

The purpose of this rotation is to observe firsthand the traumatic injuries that can be sustained and the corresponding treatments related to them.

**Objectives**

- Perform as many skills as possible within the Paramedic Scope of Practice
- Perform CPR
- Establish IV Access: Peripheral and Intraosseous
- Airway Management to include Intubation and BVM
- Medication Administration
- Bleeding Control
- Splinting
- Patient Assessment

**Operating Room**

Students will use this opportunity to work on their airway management skills in a controlled environment as well as to familiarize themselves with human anatomy.

## **Objectives**

Appropriately manage the patient's airway before, during and after anesthesia to include:

- Formation of an effective seal with a bag valve mask
- Effective ventilation with a manual ventilation device and mask
- Successful placement of an endotracheal tube or LMA in all ages and conditions of patients
- Appropriate assessment of tube placement and continued airway management
- Administration of medications to facilitate placement of endotracheal tube or LMA
- Monitoring patients, including blood pressure, pulse, respirations, level of consciousness, arterial oxygen saturation, and end-tidal carbon dioxide detection
- Assisting in operation of manual ventilation equipment (BVM)

## **Pediatrics**

The purpose of this rotation is to expose the paramedic students to the specialized care given to pediatric patients in the emergency department and to provide an opportunity for the student to develop an effective approach to pediatric patients.

## **Objectives**

- Use Assessments appropriate to the pediatric patient
- Understand the Medication Administration to the pediatric patient
- Provide proper airway management skills for pediatric patients
- Provide IV access on pediatric patients
- Observe case studies of abnormal presentations of pediatric emergencies

## **Labor and Delivery**

The purpose of this rotation is to allow the paramedic student to observe and assist with childbirth and OB emergencies, and the care of newborns.

## **Objectives**

Perform at least 5 patient assessments and accurate physical assessments of the pregnant patient to include the following:

- Patient History
- APGAR
- OB Pharmacology

## **Obstetric Emergencies**

- Breech Delivery
- Prolapsed Umbilical Cord
- Limb Presentation
- Multiple Birth
- Placenta Abruptio
- Placenta Previa
- Uterine Rupture

## **Logbook/Fisdap Documentation Guidelines**

- Documentation that is not entered within 72 hours will be invalid and will need to be repeated. Fisdap shifts will NOT be re-opened for data entry. Shift paperwork must still be turned in to validate the student's attendance. If paperwork is not turned in, the student will be counted absent.
- Shifts must be entered within 24 hours of approval from sites that the student is required to enter in Fisdap after they get approved.



- Preceptors must initial / sign all signature lines for the skill or assessment. If an arrow/line is drawn from a signature line to another signature line, this will not be accepted and will not count.
- Copies of signatures will not be accepted. Copies are considered a form of altering and/or forgery and will be grounds for dismissal from the program
- Any form missing a signature will not be given credit.
- You must fill out a patient care report (PCR) for all age, illness based assessments and ambulance rides. You are required to use the CHART method in your narrative. Your writing must be legible or the assessment will be thrown out and not count.

### **NREMT Clinical Logbook Sheets**

The following appendices are from the NREMT Portfolio defining the grading Criteria for each patient contact. Students will document the contacts on the forms below and then transfer the information to FISDAP. Students will retain the original copies.

### **Pages to Follow**

*Appendix 1*  
**National Registry of Emergency Medical Technicians®**  
**Paramedic Psychomotor Competency Portfolio Manual**  
**CLINICAL SHIFT EVALUATION WORKSHEET**



Student Name		Date		Education Program		Clinical Site		Unit or Station																
Page <u>    </u> of <u>    </u>		Time In: <u>    </u>		Time Out: <u>    </u>		Preceptor: <u>    </u>		Rating: NA = Not applicable, not needed or expected; 0 = Unsuccessful - requires excessive or critical prompting; 1 = Marginal - inconsistent, not yet competent; 2 = Successful/competent - no prompting (See description at end of instrument)																
Directions: Each contact must be rated by the student, time, and rated by the preceptor second. Mark student ratings in the row marked 'S' and preceptor ratings in row 'P'. Comment on any observations on back. Preceptors complete shaded sections.																								
Patient Age/Sex	Impression / Differential Diagnosis	LOC, Complaints, Events/Circumstances	Summary of Assessment/Interventions successfully by student	Circle Patient Contact Type	Score	Clinical Objectives							Comments and Immediate Plan for Improvement for Next Contact											
						Preceptor/TA	Team	Physical Exam	History	Performance	Communication	Professional Behavior		Team	Initiate									
1.				ALS	S																			
2.				BLS	P																			
3.				ALS	S																			
4.				BLS	P																			
5.				ALS	S																			
6.				BLS	P																			
7.				ALS	S																			
				BLS	P																			



*Appendix I*  
**National Registry of Emergency Medical Technicians®**  
**Paramedic Psychomotor Competency Portfolio Manual**  
**CLINICAL SHIFT EVALUATION WORKSHEET**

Comment on any unsatisfactory ratings or discrepancies:

Overall plan for improvement for future shifts:

Student reported:  On time,  well groomed,  In uniform and prepared to begin the shift.  Yes  No

Student knows equipment location and use.  Yes  No

Behavior was professional:  Accepts feedback openly  Self-motivated  Efficient  Flexible  Careful  Confident

Student helps clean up and restock, unprompted.  Yes  No  
 Student left site early (did not complete shift).  Yes  No

Preceptor requests a follow-up with appropriate program personnel.  Phone call  Email

Student signature

Preceptor signature

**Clinical Objectives:**

**Pre-Interview/Pre-Gathering:** Student completes an appropriate interview and gathers appropriate history; listens actively, makes eye contact, clarifies complaints, respectfully addresses patient(s); demonstrated compassion and/or firm bedside manner depending on the needs of the situation.

**Physical Exam:** Student completes an appropriate focused physical exam specific to the chief complaint and/or comprehensive head-to-toe physical examination.

**Impression & Tx Plan:** Student formulates an impression and verbalizes an appropriate treatment plan.

**Skill Performance:** Student performs technical skill accurately and safely.

**Communication:** Student communicates effectively with team, provides an adequate verbal report to other health care providers and completes a thorough written patient narrative.

**Professional Behavior Objectives:** Student demonstrates they are:

**Self-motivated:** Takes initiative to complete assignments and improve/correct problems, strives for excellence, incorporates feedback and adjusts behavior/performance.

**Flexible:** Keeps assessment and treatment times to a minimum, reassesses other personnel when not needed and organizes team to work faster/better.

**Careful:** Pays attention to detail of skills, documentation, patient comfort, setup and clean-up and completes tasks thoroughly.

**Confident:** Makes decisions, trusts and exercises good personal judgment and is aware of limitations and strengths.

**Open to feedback:** Listens to preceptor and accepts constructive feedback without being defensive (interrupting, giving excuses).

**Team Membership Objective:** Clinical Experience evaluation of field performance assesses a student as a Team Member and is isolated to evaluation of individual skill delivery or a portion of patient care that is delivered. The student is not assuming the Team Leader role but integrating with other Team Members. When evaluating the student performance as a Team Member, only the portion of care completed by the student is evaluated. The Team Member role contains an affective component and evaluation of the student's ability to complete patient care that parameters are expected to deliver.

Rating: NA = Not applicable - not needed or expected; This is a neutral rating. (Example: Student expected to only observe, or the patient did not need intervention). 0 = Unsuccessful - required excessive or critical prompting. \*Note: Ideally, students will progress their role from observation to participation in simple skills, to more complex assessments and formulating treatment plans. Students will progress at different rates and ease difficulty will vary. Students should be active and ATTEMPT to perform skills and assess/treat patients early even if this results in frequent prompting and unsuccessful ratings. Unsuccessful ratings are normal and expected in the early stages of the clinical learning process when student needs prompting. Improvement plans MUST follow any unsuccessful or inconsistent ratings.