

**ADVANCED EMT CLINICAL/FIELD REQUIREMENTS
(Minimums)**

PREHOSPITAL	HOURS	PATIENT CONTACTS
EMT – A Team Member	24	12
EMT – A Team Leader	20	10
 CLINICAL		
ED	20	10
OR	5	5 Successful Intubations
 PSYCHOMOTOR SKILLS		
IV Access		10
Intubation		5
Ventilations of Non-ETI Patients		5
Medication Administrations		10
Supraglottic Airway Insertion		5
 AGES		
Pediatrics (< 18)		5
Adults(18-65)		15
Geriatrics(65+)		10
 PATHOLOGIES/COMPLAINTS		
Trauma		15

CIC

Medical Director

EVALUATION:

Students will be evaluated on EVERY prehospital patient contact and rated by their approved preceptors. Students will be graded on all skills including assessment and treatment plans both in and out of the hospital.

Students will also be evaluated at the end of the ride out and clinical time based on overall performance and professional behavior.

GENERAL INFORMATION:

Students will sign up for clinical time during class. They will be expected to arrive at clinical/field sites on time. If a student is unable to keep their scheduled clinical/field time they need to reschedule as soon as possible. The student MUST contact the site and advise them. All clinical paperwork is to be maintained by the students. Clinical paperwork will be evaluated periodically throughout the course. Failure to present clinical/field evaluations will result in failure to complete the course. Students represent this program as well as this profession and they are expected to act in a professional manner at all times. If a problem arises with a preceptor or a location students need to contact an instructor or the JCEMS office immediately. It is better for the instructors to hear about a problem from the student. Inappropriate or unprofessional behavior may result in expulsion from the course.

FIELD INTERNSHIP OBJECTIVES:

Due to the inconsistent nature of medical emergencies, it will not always be possible to meet all objectives during the field internship, but as many skills as possible should be observed and practiced by the student, under the direct supervision of the assigned field preceptor. The student is expected to participate with both BLS and ALS skills.

Perform Patient Assessment:

- Initial Exam
- Physical Exam and History
- Vital Signs
- On-Going Exam

Monitoring Devices:

- Pulse Oximetry
- Capnography
- Glucometer

Formulate a differential diagnosis.

Make clinical decisions based upon assessment findings.

Airway positioning and BLS adjuncts:

- Recovery position
- Head-tilt jaw thrust
- Modified jaw thrust
- Oropharyngeal Airway
- Nasopharyngeal airway
- Oropharyngeal Suctioning

Administration:

- Nasal Cannula
- Venturi Mask
- Simple Face Mask
- Nonrebreather

- Pharmacology
- Venous Catheterization
- External Jugular Cannulation
- Intraosseous Access
- Saline Trap
- Fluid Administration
- Blood Draw
- EpiPen
- Meter dose Inhaler
- Nebulizer

Aerosolized
Intranasal

RX Administration:

Albuterol

Aspirin

Dextrose

Epinephrine

Glucagon

Naloxone

Nitroglycerin (Paste,Spray,Tablets)

Cardiac:

CPR

Defibrillation with an AED

Trauma Skills:

Bleeding Control

Long Bone Splinting

Joint Splinting

Traction Splinting

Body Immobilization

KED

Communications/Therapeutic

Documentation