New York State Department of Health

Emergency Medical Technician
Clinical Rotation Guide

November 2012
This guide has been prepared to help facilitate the supervised clinical experience of the EMT student in the interest of the excellence in patient care.

The clinical experience the EMT student receives plays an important role in the overall educational process of becoming an EMT. In order for the student’s clinical rotation to be a rewarding experience, there needs to be an experienced clinical team at each hospital and ambulance service that provides the required clinical rotation. The role and responsibilities of each member of these teams are outlined in this guide.

To promote a systematic and standardized approach to the clinical rotation experience, the skills appropriate to the EMT have been defined and evaluation forms for both the student and the preceptor have been developed. Students should be given every opportunity possible to use as many of their skills as possible during their clinical rotation. Just as important are the observations the EMT student will have during his/her clinical rotations. The student may not have a great deal of opportunities to use the new skills they have learned, but the observations they have can be just as rewarding.

There are two types of clinical rotations available to the EMT student. A student must complete a minimum of 10 hours of clinical rotation to complete the course and to be eligible to take the New York State Practical Exam. This clinical rotation can be done either with a NYS certified ambulance service or at a hospital’s Emergency Department or a combination of both. Following is a description of each rotation:

**Ambulance Clinical Rotation**
The ambulance rotation affords the student the opportunity to experience what it is like to be a member of an ambulance crew. The student, under the direct supervision of an authorized preceptor, will be allowed to use the skills and knowledge he/she has learned in their current course. This clinical rotation will have the student involved in all aspects of an ambulance call from checking of the ambulance at the start of a shift, to providing patient care, and turning over the patient to the Emergency Department staff.

**Emergency Department Clinical Rotation**
The Emergency Department (ED) rotation affords the student the opportunity to experience how the ED works and how a patient is cared for in the ED once an ambulance turns over the care of their patient to the ED staff. The ED clinical rotation will also afford the student, under the direct supervision of an authorized preceptor, the ability to use the skills and knowledge he/she has learned in their current course.

At the completion of each scheduled clinical rotation, the preceptor should complete the student evaluation form. This form should be reviewed by the course CIC along with the student. The student evaluation form can be an important and useful tool in the educational process.

If there are any questions or concerns during the clinical rotation that need immediate attention, the preceptor should contact the course’s Certified Instructor Coordinator for assistance.
Hospital Emergency Department Staff
Clinical Guide

This section is provided as a guide for the ED staff to assure they are familiar with what is expected of them and of the EMT student during this important clinical rotation. The ED staff member/preceptor who will be responsible for the EMT student should review these guidelines along with any other materials provided by the EMT student and the course sponsor. Any questions or concerns about the student or the clinical rotation should be directed to the EMT student’s Certified Instructor Coordinator.

One staff member should be designated as the staff member/preceptor who is in-charge of the EMT student during this clinical rotation. Many Emergency Departments and EMS course sponsors designate the Charge Nurse or Triage Nurse as the person who the EMT student will advice of their presence. The staff member who is assigned to the EMT student should be knowledgeable and experienced in emergency nursing, as well as pre-hospital emergency medical services, including the current EMT training program. Once the EMT student has been assigned to an ED staff member, the staff member should do the following:

✓ Confirm the student’s identity through photo identification if available.
✓ Initiate any paperwork required to be completed for the clinical rotation.
✓ Establish what skills the student is allowed to perform according to the Skills Eligibility form and what will be expected of the student during the clinical rotation.
✓ Introduce the student to the on-duty physician(s) in the ED and advice the physician(s) of the level of training the student is currently enrolled in.
✓ Assure the student is familiar with the ED and all safety requirements are reviewed.
✓ Assure that the student has been exposed to how patients are received, triaged, and cared for within the ED.
✓ Monitor all activities related to the student’s care of patients within the ED.
✓ Review and critique, with the student, the care he/she has provided to patients.
✓ Complete any required paperwork and/or evaluation forms for the student.
Ambulance Service Staff
Clinical Guide

This section is provided as a guide for the ambulance service staff to assure they are familiar with what is expected of them and of the EMT student. The ambulance staff member/preceptor who will be responsible for the EMT student should review these guidelines along with any other materials provided by the EMT student and the course sponsor. Any questions or concerns about the student or the clinical rotation should be directed to the EMT student’s Certified Instructor Coordinator.

One staff member from the ambulance service should be designated as the staff member/preceptor who is in-charge of the EMT student during this clinical rotation. This staff member must be a NYS Certified EMT-B or higher and should be knowledgeable and experienced with the current EMT training program. Once the EMT student has been assigned to the staff member the staff member should do the following:

- Confirm the student’s identity through photo identification if available.
- Initiate any paperwork required to be completed for the clinical rotation.
- Establish what skills the student is allowed to perform according to the Skills Eligibility form and what will be expected of the student during the clinical rotation.
- Introduce the student to the on-duty ambulance service staff.
- Assure that the student is familiar with the ambulances and where equipment is located.
- Review the procedures of the agency for receiving emergency calls, communications, response, levels of care in the agency, mutual aid plans, and destination hospitals served by the agency.
- Complete objectives listed on the Clinical Evaluation form under the section entitled “Ambulance ONLY: Operational Objectives”.
- Complete any required paperwork and/or evaluation forms for the student.
Emergency Medical Technician Student
Clinical Guide

This section is provided as a guide for the EMT student to assure he/she is familiar with what is expected of them during the clinical rotations. It is the responsibility of the EMT student to assure that all clinical rotation staff members/preceptors are knowledgeable in what the student is capable of doing during the clinical rotation. The EMT student is also responsible for assuring that all required paperwork is completed for the clinical rotation. If any problems occur during the clinical rotation the EMT student should contact the course Certified Instructor Coordinator as soon as possible. The EMT student should do the following:

✓ Be neatly attired and in a physical and mental state conducive to learning.
✓ Have proper identification and name tag available to all clinical rotation staff.
✓ Report to the appropriate staff member at the ED or ambulance service on the date and time assigned by your Course Instructor Coordinator.
✓ Be under direct supervision of an assigned staff member/preceptor from the hospital or ambulance service.
✓ Observe all rules pertaining to patient confidentiality.
✓ Observe all policies and regulations set by the EMS Course Instructor Coordinator, hospital, and ambulance service.
✓ Return all required paperwork to the course CIC.
Emergency Medical Technician
Student Skills Eligibility

Student: ___________________________ Hospital/Agency Name: ___________________________

(print)

Course CIC: ___________________________ EMS Course Sponsor: ___________________________

(print)

The student listed above has been educated in the skills, which the course CIC has initialed below. This student may perform these skills under direct supervision of the preceptor. The student is not to perform any skill in which he/she has not been educated.

_____ Baseline vital signs including respirations, pulse, blood pressure, and lung sounds.

_____ Lifting and moving patients

_____ Airway skills including oralpharyngeal and nasopharyngeal airways, oxygen therapy, artificial ventilations using bag valve mask and pocket mask, and suctioning.

_____ Cardiopulmonary Resuscitation for infant, child, and adult.

_____ Patient assessment skills and history & physical exams.

_____ Assisting patient with self-administered medications to include Nitroglycerin and Bronchodilator inhalers.

_____ Operation of an Automated External Defibrillator (AED).

_____ Administration of oral glucose.

_____ Epinephrine auto injectors

_____ Safe techniques for restraining a patient with a behavioral problem.

_____ Normal cephalic delivery of an infant including cutting of the umbilical cord, delivery of the placenta, and post-delivery care of the mother and infant.

_____ Control of external hemorrhaging and care for hypoperfusion.

_____ Care for soft tissue injuries including burns and amputations.

_____ Splinting techniques for extremities including traction splinting.

_____ Immobilization techniques for suspected spinal injuries.

_____ Care of pediatric patients.

_____ Removal of patients with suspected spinal injuries from a motor vehicle.

_____ Mass Casualty Incidents and performing triage.

_____ Other skills not listed: _______________________________________________________

_________________________________________ ____________________________
Course CIC Signature: ___________________________ Date: ____________

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Clinical Internship Objectives for Emergency Department & Ambulance Rotations

The EMT-B candidate is required to perform clinical skill objectives based on the performance criteria in the NYS EMT-B curriculum and the current standard of care. The Certified Instructor Coordinator will review the course sponsor’s clinical internship policy and procedures prior to the EMT-B’s clinical assignment.

The Certified Instructor Coordinator shall review the following clinical internship objectives with each candidate and ambulance or emergency department preceptors identifying candidate performance and evaluation criteria. In addition, a clinical evaluation form will be completed by the preceptor and returned to the Certified Instructor Coordinator. Prior to each clinical rotation, both the clinical staff and candidate(s) are encouraged to complete an orientation of expected behavior pertaining to the time before, during and after each clinical and ambulance rotation.

Clinical Internship Objectives
During emergency department or ambulance clinical rotations, the student should be under direct supervision and demonstrate proficiency for each of the following:

Emergency Department/Ambulance Clinical Objectives:
Γ Perform patient assessment including medical history and conducting a physical examination. Minimum assessment skills should include taking and recording vital signs and auscultation of lung sounds.
Γ Assists and reviews the treatment of trauma emergencies
Γ Assists and reviews the treatment of medical emergencies
Γ Assists in triaging patients.
Γ Assists in and use appropriate body substance isolation techniques.
Γ Assists in hemorrhage control.
Γ Assists in splinting.
Γ Assists in respiratory and/or cardiac arrest, including the performance of CPR, basic airway management and on-scene defibrillation.
Γ Assists in administration of Epinephrine Auto Injector
Γ Assists in use of Bronchodilator.
Γ Assists in use of Nitroglycerine.
Γ Assists/observes in obtaining medical control
Γ Assists/observes in transfer of patient information and referral

Ambulance Operations Objectives:
Γ Assists with rig-checkout/restock. Locates, inspects and prepares equipment for use
Γ Assists with safe-scene operations. Locates and is familiar with safety equipment.
Γ Assists with lifting and carrying. Locates and is familiar with safe operation.
Γ Assists with communications. Locates and operates equipment.
Γ Assists with patient care report completion and transfer of information to ED.

The following evaluation form is to be completed by the student’s preceptor for the emergency department or ambulance staff. The completed form must be submitted to the Certified Instructor Coordinator for the candidate to be eligible for course completion.
This form must be completed for each block of clinical rotation time the student attends.

EMT-B Student Name: ____________________________  Rotation Type: □ ED Site  □ Ambulance
EMS Course Sponsor: ____________________________  Course CIC: ____________________________
CIC Contact Phone #: ____________________________  Hospital/Agency Name: ____________________________
Student Arrival Time:___________________  Departure Time:___________________  Date: _______________________

Rating Key:
1 = Needs improvement – Student did not meet the minimum standard of performance
2 = Satisfactory – Student met the minimum standard, but required guidance or assistance
3 = Very Good – Student performed the minimum standard without guidance or assistance
4 = Excellent – Student shows mastery level and was able to function independently

PLEASE USE THE BACK OF THIS FORM FOR ADDITIONAL COMMENTS IF NEEDED

<table>
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<tr>
<th>ED or Ambulance Skill Performed</th>
<th>Amt. of times Performed</th>
<th>Overall Rating</th>
<th>Preceptor’s Comments / Recommendations for Student Improvement</th>
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### Ambulance ONLY: Operational Objectives:

#### Precall Activities
- Describe procedures of how calls are received by the ambulance service: [ ] Yes [ ] No
- Describe the procedure for crew response to a call: [ ] Yes [ ] No
- Explain and demonstrate the procedure for checking the ambulance and restocking: [ ] Yes [ ] No
- Discuss the infection control procedures of the ambulance service: [ ] Yes [ ] No

#### During Call Activities
- Observe/participate in the assessment/management of the patient as directed by the preceptor: [ ] Yes [ ] No
- Demonstrate how to don personal protective equipment and supplies for BSI: [ ] Yes [ ] No
- Discuss potential hazards to the EMT and bystanders at an incident and how they are controlled: [ ] Yes [ ] No
- Explain or demonstrate the proper procedure for vehicle/equipment decontamination in accordance with the services exposure control plan: [ ] Yes [ ] No
- Describe communications procedures for ambulance to dispatch and for ambulance to hospital: [ ] Yes [ ] No
- Demonstrate the procedure for making up the stretcher’s linen and where hospital supplies are: [ ] Yes [ ] No

#### General Observation Activities
- Demonstrate proper procedures for loading and unloading the stretcher: [ ] Yes [ ] No
- Demonstrate how to use patient carrying devices (i.e. stair chair, backboard, etc.): [ ] Yes [ ] No
- Describe mutual aid procedures including ALS intercepts: [ ] Yes [ ] No
- Describe how first responder agencies interface with the ambulance service: [ ] Yes [ ] No
- Describe how the ambulance service interfaces with police, fire, and rescue personnel: [ ] Yes [ ] No
- Explain the ambulance service’s procedures for Incident Command and MCI management: [ ] Yes [ ] No

### ADDITIONAL COMMENTS:

__________________________________________

__________________________________________

__________________________________________

EVALUATOR: (PRINT) ______________________ Signature: ______________________ Date: ______________________

STUDENT: (PRINT) ______________________ Signature: ______________________ Date: ______________________
EMS STUDENT EVALUATION OF CLINICAL ROTATION

A separate form should be completed for each clinical rotation the student completes

Student Name: ____________________________  Date of Rotation: ____________

Rotation performed at: ______________________

Facility  Department

Use the following rating scale, circle the number which best describes your evaluation of the designated rotation with 1 standing for the worst and 5 standing for the best. Use the back of this form for additional space for you positive or negative comments.

1. Appropriate Orientation by the CIC  1  2  3  4  5
   Comments:____________________________________________________________________________

2. Responsibilities clearly defined by the CIC  1  2  3  4  5
   Comments:____________________________________________________________________________

3. Adequate Clinical Supervision at the clinical site  1  2  3  4  5
   Comments:____________________________________________________________________________

4. Availability of preceptor(s) during the clinical session  1  2  3  4  5
   Comments:____________________________________________________________________________

5. Responsiveness to clinical questions by staff at clinical site  1  2  3  4  5
   Comments:____________________________________________________________________________

6. Incorporation as member of service or clinical site  1  2  3  4  5
   Comments:____________________________________________________________________________

7. Educational objectives accomplished  1  2  3  4  5
   Comments:____________________________________________________________________________

8. Overall educational experience  1  2  3  4  5
   Comments:____________________________________________________________________________

Comment on Individual Preceptors with which you have had significant educational interactions.

Preceptor or faculty  Availability  Clinical teaching
1. ____________________________  1  2  3  4  5  1  2  3  4  5
   Comments:____________________________________________________________________________

2. ____________________________  1  2  3  4  5  1  2  3  4  5
   Comments:____________________________________________________________________________

3. ____________________________  1  2  3  4  5  1  2  3  4  5
   Comments:____________________________________________________________________________